

ANNUAL STATEMENT

For the Year Ended December 31, 2018

of the Condition and Affairs of the

Medical Mutual Insurance Company of Maine

NAIC Group Code..... 4775, 4775 NAIC Company Code..... 36277 Employer's ID Number..... 01-0355669 (Current Period)

Organized under the Laws of ME State of Domicile or Port of Entry ME Country of Domicile US

Incorporated/Organized..... March 20, 1978 Commenced Business..... September 1, 1978

Statutory Home Office One City Center .. Portland .. ME .. US .. 04101-4009

(Street and Number) (City or Town, State, Country and Zip Code)

Main Administrative Office One City Center .. Portland .. ME .. US .. 04101-4009 207-775-2791

(Street and Number) (City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)

Mail Address P.O. Box 15275 .. Portland .. ME .. US .. 04112-5275

(Street and Number or P. O. Box) (City or Town, State, Country and Zip Code)

Primary Location of Books and Records One City Center .. Portland .. ME .. US .. 04101-4009 207-775-2791 (Street and Number) (City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)

Internet Web Site Address www.medicalmutual.com

Statutory Statement Contact Barbara T. Sinclair 207-775-2791

ame) (Area Code) (Telephone Number) (Extension)

bsinclair@medicalmutual.com 207-523-8380 (E-Mail Address) (Fax Number)

OFFICERS

Name Title Name Title

1. Frank W. Lavoie M.D.President2. O. Robert Stevens M.D.Treasurer3. William L. Medd M.D.Chairman4. Cynthia A. DeSoi M.D.Secretary

OTHER

William F. D'Angelo M.D. Vice Chairman Barbara T. Sinclair VP/CFO
John P. Doyle VP Marketing/Administration Stephen D. Hodgkin VP/CIO
David L. Johnson VP Underwriting Mary Elizabeth Knox VP Claims

DIRECTORS OR TRUSTEES

Peter W. Bates M.D. William F. D'Angelo M.D. Cynthia A. DeSoi M.D. Matthew C. Dugan D.O. Rebekah J. Gass M.D. Sean T. Hanley M.D. Wendy J. Jones Adam W. Kunin M.D. Frank W. Lavoie M.D. David B. McDermott M.D. William L. Medd M.D. Jeremy R. Morton M.D. Robert D. Sansonetti M.D. Lois N. Skillings O. Robert Stevens M.D. James M. Totten

State of...... MAINE
County of..... CUMBERLAND

The officers of this reporting entity being duly sworn, each depose and say that they are the described officers of said reporting entity, and that on the reporting period stated above, all of the herein described assets were the absolute property of the said reporting entity, free and clear from any liens or claims thereon, except as herein stated, and that this statement, together with related exhibits, schedules and explanations therein contained, annexed or referred to, is a full and true statement of all the assets and liabilities and of the condition and affairs of the said reporting entity as of the reporting period stated above, and of its income and deductions therefrom for the period ended, and have been completed in accordance with the NAIC *Annual Statement Instructions* and *Accounting Practices and Procedures* manual except to the extent that: (1) state law may differ; or, (2) that state rules or regulations require differences in reporting not related to accounting practices and procedures, according to the best of their information, knowledge and belief, respectively. Furthermore, the scope of this attestation by the described officers also includes the related corresponding electronic filing with the NAIC, when required, that is an exact copy (except for formatting differences due to electronic filing) of the enclosed statement. The electronic filing may be requested by various regulators in lieu of or in addition to the enclosed statement.

(Signature) Frank W. Lavoie M.D.	(Signature) O. Robert Stevens M.D.	,		
(Printed Name) President	2. (Printed Name) Treasurer		(Printed Name) Chairman	
(Title)	(Title)		(Title)	
Subscribed and sworn to before me	a. Is this an	original filing?	Yes [X] No []	
This day of		 State the amendment number Date filed Number of pages attached 		

Annual Statement for the year 2018 of the Medical Mutual Insurance Company of Maine ASSETS

			Current Year		Prior Year
		1	2 Nonadmitted	3 Net Admitted Assets	Net
1.	Bonds (Schedule D)	Assets 231,629,582	Assets	(Cols. 1 - 2) 231,629,582	Admitted Assets213,272,598
2.	Stocks (Schedule D):	231,029,302		231,029,362	213,272,396
۷.	2.1 Preferred stocks			0	
	2.2 Common stocks				
3.	Mortgage loans on real estate (Schedule B):	43,236,360		43,236,360	
٥.				0	
	3.1 First liens				
4					
4.	Real estate (Schedule A):				
	4.1 Properties occupied by the company (less \$0 encumbrances)			0	
	4.2 Properties held for the production of income (less \$0 encumbrances)				
	4.3 Properties held for sale (less \$0 encumbrances)			0	
5.	Cash (\$8,329,708, Schedule E-Part 1), cash equivalents (\$3,017,951, Schedule E-Part 2) and short-term investments (\$3,694,586, Schedule DA)				
6.	Contract loans (including \$0 premium notes)			0	
7.	Derivatives (Schedule DB)			0	
8.	Other invested assets (Schedule BA)				
9.	Receivables for securities	7,778		7,778	987
10.	Securities lending reinvested collateral assets (Schedule DL)			0	
11.	Aggregate write-ins for invested assets	0	0	0	0
12.	Subtotals, cash and invested assets (Lines 1 to 11)	289,968,991	1,000	289,967,991	290,654,622
13.	Title plants less \$0 charged off (for Title insurers only)			0	
14.	Investment income due and accrued	1,781,254		1,781,254	1,643,512
15.	Premiums and considerations:				
	15.1 Uncollected premiums and agents' balances in the course of collection	204,113	1,494	202,619	341,294
	15.2 Deferred premiums, agents' balances and installments booked but deferred				
	and not yet due (including \$0 earned but unbilled premiums)	16,149,603		16,149,603	17,896,562
	redetermination (\$0)			0	
16.	Reinsurance:				
	16.1 Amounts recoverable from reinsurers	51,684		51,684	460,725
	16.2 Funds held by or deposited with reinsured companies			0	
	16.3 Other amounts receivable under reinsurance contracts			0	
17.	Amounts receivable relating to uninsured plans			0	
18.1	Current federal and foreign income tax recoverable and interest thereon			0	
18.2	Net deferred tax asset			0	
19.	Guaranty funds receivable or on deposit			0	
20.	Electronic data processing equipment and software	287,843	61,621	226,222	107,943
21.	Furniture and equipment, including health care delivery assets (\$0)	228,576	228,576	0	
22.	Net adjustment in assets and liabilities due to foreign exchange rates			0	
23.	Receivables from parent, subsidiaries and affiliates				
24.	Health care (\$0) and other amounts receivable			0	
25.	Aggregate write-ins for other-than-invested assets	1,606,299	326,038	1,280,261	1,599,221
26.	Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25)	310,295,179	618,729	309,676,450	312,776,517
27.	From Separate Accounts, Segregated Accounts and Protected Cell Accounts			0	
28.	TOTAL (Lines 26 and 27)		618,729	309,676,450	312,776,517
4		OF WRITE-INS	ı	T	
	Summary of remaining write-ins for Line 11 from overflow page				
	Totals (Lines 1101 through 1103 plus 1198) (Line 11 above)				
	OTHER RECEIVABLES				
	. RMA ESCROW ACCOUNT				
	Summary of remaining write-ins for Line 25 from overflow page				
	Totals (Lines 2501 through 2503 plus 2598) (Line 25 above)				

Annual Statement for the year 2018 of the **Medical Mutual Insurance Company of Maine** LIABILITIES, SURPLUS AND OTHER FUNDS

	·	1 Current Year	2 Prior Year
1.	Losses (Part 2A, Line 35, Column 8)		63,194,706
2.	Reinsurance payable on paid losses and loss adjustment expenses (Schedule F, Part 1, Column 6)		
3.	Loss adjustment expenses (Part 2A, Line 35, Column 9)	25,466,537	28,890,763
4.	Commissions payable, contingent commissions and other similar charges		
5.	Other expenses (excluding taxes, licenses and fees)	1,030,523	2,130,609
6.	Taxes, licenses and fees (excluding federal and foreign income taxes)	106,560	194,466
7.1	Current federal and foreign income taxes (including \$0 on realized capital gains (losses))	999,405	1,659,003
7.2	Net deferred tax liability	1,132,727	2,786,025
8.	Borrowed money \$0 and interest thereon \$0		
9.	Unearned premiums (Part 1A, Line 38, Column 5) (after deducting unearned premiums for ceded reinsurance of \$6,155,696 and including warranty reserves of \$0 and accrued accident and health experience rating refunds including \$0 for medical loss ratio rebate per the Public Health Service Act)	18,213,971	22,082,031
10.	Advance premium	222,060	187,304
11.	Dividends declared and unpaid:		
	11.1 Stockholders		
	11.2 Policyholders	1,837,343	2,049,731
12.	Ceded reinsurance premiums payable (net of ceding commissions)	5,462,821	6,192,640
13.	Funds held by company under reinsurance treaties (Schedule F, Part 3, Column 20)		
14.	Amounts withheld or retained by company for account of others		
15.	Remittances and items not allocated		
16.	Provision for reinsurance (including \$0 certified) (Schedule F, Part 3, Column 78)		
17.	Net adjustments in assets and liabilities due to foreign exchange rates		
18.	Drafts outstanding		
19.	Payable to parent, subsidiaries and affiliates.		
20.	Derivatives		
21.	Payable for securities		
22.	Payable for securities lending		
23.	Liability for amounts held under uninsured plans		
24.	Capital notes \$0 and interest thereon \$0		
25.	Aggregate write-ins for liabilities		
26.	Total liabilities excluding protected cell liabilities (Lines 1 through 25)		
27.	Protected cell liabilities.		
	Total liabilities (Lines 26 and 27)		
28.			
29.	Aggregate write-ins for special surplus funds		
30.	Common capital stock		
31.	·		
32.	Aggregate write-ins for other-than-special surplus funds		
33.	Surplus notes		
34.	Gross paid in and contributed surplus		
35.	Unassigned funds (surplus)	180,379,734	178,308,965
36.	Less treasury stock, at cost:		
	36.10.000 shares common (value included in Line 30 \$0)		
	36.20.000 shares preferred (value included in Line 31 \$0)		
37.	Surplus as regards policyholders (Lines 29 to 35, less 36) (Page 4, Line 39)		
38.	TOTAL (Page 2, Line 28, Col. 3)	309,676,450	312,776,517
1	DETAILS OF WRITE-INS	1	
	OTHER PAYABLES	, ,	, ,
	Common of complicing units in a fact line OF from quadratures		
	Summary of remaining write-ins for Line 25 from overflow page		
	Totals (Lines 2501 through 2503 plus 2598) (Line 25 above)		
	Summary of remaining write-ins for Line 29 from overflow page		
	Totals (Lines 2901 through 2903 plus 2998) (Line 29 above)		
3201.			
	Summary of remaining write-ins for Line 32 from overflow page		
3299.	Totals (Lines 3201 through 3203 plus 3298) (Line 32 above)]0	<u> </u> 0

Annual Statement for the year 2018 of the Medical Mutual Insurance Company of Maine STATEMENT OF INCOME

	OTATEMENT OF INCOME		
	UNDERWRITING INCOME	1 Current Veer	2 Dries Vees
4		Current Year35,743,714	Prior Year33,878,058
1.	Premiums earned (Part 1, Line 35, Column 4) DEDUCTIONS:	35,745,714	
2.	Losses incurred (Part 2, Line 35, Column 7)	21 244 280	16,490,244
3.	Loss adjustment expenses incurred (Part 3, Line 25, Column 1)		7,312,625
4.	Other underwriting expenses incurred (Part 3, Line 25, Column 2)		9,243,226
5.	Aggregate write-ins for underwriting deductions		0
6.	Total underwriting deductions (Lines 2 through 5)		
7.	Net income of protected cells		
8.	Net underwriting gain (loss) (Line 1 minus Line 6 plus Line 7)		
	INVESTMENT INCOME	,	,,,,,,
9.	Net investment income earned (Exhibit of Net Investment Income, Line 17)	8,020,763	7,497,228
10.	Net realized capital gains (losses) less capital gains tax of \$761,808 (Exhibit of Capital Gains (Losses))		1,322,519
11.	Net investment gain (loss) (Lines 9 + 10)		8,819,747
	OTHER INCOME		
12.	Net gain (loss) from agents' or premium balances charged off (amount recovered \$0		
	amount charged off \$0)		
13.	· · · · · · · · · · · · · · · · · · ·		
14.	Aggregate write-ins for miscellaneous income		
15.	Total other income (Lines 12 through 14)	37,683	38,523
16.	Net income before dividends to policyholders, after capital gains tax and before all other federal and foreign		
	income taxes (Lines 8 + 11 + 15)		
	Dividends to policyholders	1,495,857	1,986,732
18.	Net income, after dividends to policyholders, after capital gains tax and before all other federal and foreign	0.404.400	7 700 504
40	income taxes (Line 16 minus Line 17)		7,703,501
19.	Federal and foreign income taxes incurred		1,256,872
20.	Net income (Line 18 minus Line 19) (to Line 22)	7,496,678	6,446,629
	CAPITAL AND SURPLUS ACCOUNT		
21.	Surplus as regards policyholders, December 31 prior year (Page 4, Line 39, Column 2)		
22.	Net income (from Line 20)	7,496,678	6,446,629
23.	Net transfers (to) from Protected Cell accounts		
24.	Change in net unrealized capital gains or (losses) less capital gains tax of \$0		7,360,896
25.	Change in net unrealized foreign exchange capital gain (loss)		
26.	Change in net deferred income tax		· · · · · · · · · · · · · · · · · · ·
27.	Change in nonadmitted assets (Exhibit of Nonadmitted Assets, Line 28, Column 3)		(337,522)
28.	Change in provision for reinsurance (Page 3, Line 16, Column 2 minus Column 1)		
29.	Change in surplus notes		
30.	Surplus (contributed to) withdrawn from Protected Cells		
31.	Cumulative effect of changes in accounting principles		
32.	Capital changes:		
	32.1 Paid in		
	32.2 Transferred from surplus (Stock Dividend)		
	32.3 Transferred to surplus		
33.	Surplus adjustments:		
	33.1 Paid in		
	33.2 Transferred to capital (Stock Dividend)		
	33.3. Transferred from capital		
34.	Net remittances from or (to) Home Office		
35.	Dividends to stockholders		
36.	Change in treasury stock (Page 3, Lines 36.1 and 36.2, Column 2 minus Column 1)		
37.	Aggregate write-ins for gains and losses in surplus	(149,447)	43,427
38.	Change in surplus as regards policyholders for the year (Lines 22 through 37)	2,070,769	12,492,976
39.	Surplus as regards policyholders, December 31 current year (Line 21 plus Line 38) (Page 3, Line 37)	180,379,734	178,308,965
	DETAILS OF WRITE-INS		
	Summary of remaining write-ins for Line 5 from overflow page		0
	Totals (Lines 0501 through 0503 plus 0598) (Line 5 above)		0
-		,	7,403
	Summary of remaining write-ins for Line 14 from overflow page		0
	Totals (Lines 1401 through 1403 plus 1498) (Line 14 above)		
	NON VESTED PENSION BENEFITS.		
	NON VESTED FENSION DENEFITS	\ · · /	43,421
	Summary of remaining write-ins for Line 37 from overflow page		0
	Totals (Lines 3701 through 3703 plus 3798) (Line 37 above)		
		· · · / / · · · ·	-,

Annual Statement for the year 2018 of the Medical Mutual Insurance Company of Maine **CASH FLOW**

		1 Current Year	2 Prior Year
	CASH FROM OPERATIONS	Outrent Tear	T HOL T COL
Premiums co	ollected net of reinsurance	32,894,791	35,635,453
Net investme	ent income		8,120,219
 Miscellaneou 	us income		
4. Total (Lines	1 through 3)	41,058,553	43,794,195
5. Benefit and I	oss related payments	14,147,642	15,507,794
6. Net transfers	s to Separate Accounts, Segregated Accounts and Protected Cell Accounts		
7. Commission	s, expenses paid and aggregate write-ins for deductions		15,524,910
8. Dividends pa	aid to policyholders	1,708,245	1,958,440
9. Federal and	foreign income taxes paid (recovered) net of \$1,734,715 tax on capital gains (losses)	2,328,927	1,882,159
10. Total (Lines	5 through 9)		34,873,303
11. Net cash from	m operations (Line 4 minus Line 10)	3,938,160	8,920,892
	CASH FROM INVESTMENTS		
12. Proceeds fro	om investments sold, matured or repaid:		
12.1 Bonds	<u> </u>	44,009,527	59,332,642
12.2 Stocks	3	7,348,037	2,331,992
12.3 Mortga	age loans		
12.4 Real e	estate		
12.5 Other	invested assets		
12.6 Net ga	ains or (losses) on cash, cash equivalents and short-term investments	(950)	(452
12.7 Miscel	llaneous proceeds	16,749	139,693
12.8 Total i	nvestment proceeds (Lines 12.1 to 12.7)	51,373,363	61,803,875
13. Cost of inves	stments acquired (long-term only):		
13.1 Bonds	<u> </u>	63,270,762	64,623,214
13.2 Stocks	3	3,652,630	2,951,447
13.3 Mortga	age loans		
	estate		
13.5 Other	invested assets	50,000	
13.6 Miscel	llaneous applications	6,791	
	nvestments acquired (Lines 13.1 to 13.6)		
14. Net increase	(decrease) in contract loans and premium notes		
15. Net cash from	m investments (Line 12.8 minus Lines 13.7 minus Line 14)	(15,606,820)	(5,770,786
	CASH FROM FINANCING AND MISCELLANEOUS SOURCES		
16. Cash provide			
	is notes, capital notes		
	al and paid in surplus, less treasury stock		
	ved funds		
	eposits on deposit-type contracts and other insurance liabilities		
	nds to stockholders		
	cash provided (applied)		
	m financing and miscellaneous sources (Lines 16.1 to 16.4 minus Line 16.5 plus Line 16.6)		
	ILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS		
	in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17)	(11 306 350)	2 206 07/
_	equivalents and short-term investments (Line 11, plus Lines 15 and 17)	(11,300,230)	2,200,972
	ning of year	26 240 405	2/ 1/1 524
=			
19.2 End o	f year (Line 18 plus Line 19.1)		26,348,495

20.0001

PART 1 - PREMIUMS EARNED

		Net Premiums	2 Unearned Premiums December 31 Prior Year-	3 Unearned Premiums December 31 Current Year-	4 Premiums Earned
	Line of Business	Written per Column 6, Part 1B	per Col. 3, Last Year's Part 1	per Col. 5, Part 1A	During Year (Cols. 1 + 2 - 3)
1.	Fire	0		0	0
2.	Allied lines	0		0	0
3.	Farmowners multiple peril	0		0	
4.	Homeowners multiple peril	0		0	0
5.	Commercial multiple peril			0	0
6.	Mortgage guaranty			0	0
8.	Ocean marine			0	0
9.	Inland marine			0	0
10.	Financial guaranty			0	0
11.1	Medical professional liability - occurrence			1,009,251	
11.2	Medical professional liability - claims-made			16,930,645	
12.	Earthquake			0	
13.	Group accident and health			0	
14.	Credit accident and health (group and individual)				
15.	Other accident and health			0	
16.	Workers' compensation			0	
17.1	Other liability - occurrence			388,863	
17.1	Other liability - claims-made				
17.2	Excess workers' compensation			0	•
	Products liability - occurrence			0	
18.1				0	
18.2	Products liability - claims-made				
	Private passenger auto liability			0	
	Commercial auto liability			0	0
21.	Auto physical damage			0	0
22.	Aircraft (all perils)			0	0
23.	Fidelity			0	0
24.	Surety			0	0
26.	Burglary and theft			0	0
27.	Boiler and machinery			0	0
28.	Credit			0	0
29.	International			0	0
30.	Warranty			0	0
31.	Reinsurance - nonproportional assumed property			0	0
32.	Reinsurance - nonproportional assumed liability			0	0
33.	Reinsurance - nonproportional assumed financial lines	0		0	0
34.	Aggregate write-ins for other lines of business	0	0	0	0
35.	TOTALS	31,875,654	22,082,031	18,213,971	35,743,714
	Di	ETAILS OF WRITE-INS			
3401.		0		0	0
3402.		0		0	0
3403.		0		0	0
3498.	Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0
	Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)		0		

PART 1A - RECAPITULATION OF ALL PREMIUMS

4 5 deserve for atte Credits Retrospective strments Based Experience
(114,788
, ,
0
18,213,97
18,213,971
0
0

⁽a) State here basis of computation used in each case:

PART 1B - PREMIUMS WRITTEN

	.,	ART 1B - PREM 1		ce Assumed	Reinsurar	nce Ceded	6
		Direct	2	3	4	5	Net Premiums Written
	Line of Business	Business (a)	From Affiliates	From Non-Affiliates	To Affiliates	To Non-Affiliates	(Cols. 1 + 2 + 3 - 4 - 5)
1.	Fire	, ,	7 timates	14011741IIIdloo	7 timates	14011741IIIIacco	0
							0
2.	Allied lines						0
3.	Farmowners multiple peril						0
4.	Homeowners multiple peril						0
5.	Commercial multiple peril						0
6.	Mortgage guaranty						0
8.	Ocean marine						0
9.	Inland marine						0
10.	Financial guaranty						0
11.1	Medical professional liability - occurrence	1,715,518				230,826	1,484,692
11.2	Medical professional liability - claims-made	39,529,955	16,061			9,610,052	29,935,964
12.	Earthquake						0
13.	Group accident and health						0
14.	Credit accident and health (group and individual)						0
15.	Other accident and health						0
16.	Workers' compensation						0
17.1	Other liability - occurrence	772,606				89,667	682,939
17.2	Other liability - claims-made					259,177	(227,941
17.3	Excess workers' compensation					,	0
18.1	Products liability - occurrence						0
18.2	Products liability - claims-made						0
	Private passenger auto liability						0
							0
	Commercial auto liability						
21.	Auto physical damage						0
22.	Aircraft (all perils)						0
23.	Fidelity						0
24.	Surety						0
26.	Burglary and theft						0
27.	Boiler and machinery						0
28.	Credit						0
29.	International						0
30.	Warranty						0
31.	Reinsurance - nonproportional assumed property	XXX					0
32.	Reinsurance - nonproportional assumed liability	XXX					0
33.	Reinsurance - nonproportional assumed financial lines	XXX					0
34.	Aggregate write-ins for other lines of business	0	0	0	0	0	0
35.	TOTALS	42,049,315	16,061	0	0	10,189,722	31,875,654
			F WRITE-INS				
3401.							
3402.							0
3403.							Λ
3498.	Cummon of remaining units ins faction 24 from	^		^	^	^	0
3496.	Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0

⁽a) Does the company's direct premiums written include premiums recorded on an installment basis? Yes $[\]$ No $[\ X\]$

Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)...

If yes: 1. The amount of such installment premiums \$......0.

^{2.} Amount at which such installment premiums would have been reported had they been recorded on an annualized basis \$..........0.

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2 - LOSSES PAID AND INCURRED

Losses Paid Less Salvage					5	6	7	8
	1 Direct	2 Reinsurance	3 Reinsurance	4 Net Payments	Net Losses Unpaid Current Year	Net Losses Unpaid	Losses Incurred Current Year	Percentage of Losses Incurred (Col. 7, Part 2) to Premiums Earned
4	Line of Business Business	Assumed	Recovered	(Cols. 1 + 2 - 3)	(Part 2A, Col. 8)	Prior Year	(Cols. 4 + 5 - 6)	(Col. 4, Part 1)
1.	Fire				0		U	0.0
2. 3.	Farmowners multiple peril				0		U	0.0
-					0		U	0.0
4.	Homeowners multiple peril			0	0		0	0.0
5.	Commercial multiple peril]0	0		0	0.0
6.	Mortgage guaranty			0	0		0	0.0
8.	Ocean marine			0	0		0	0.0
9.	Inland marine			0	0		0	0.0
10.	Financial guaranty			0	0		0	0.0
11.1	Medical professional liability - occurrence875,0			875,000		4,660,021	778,299	50.1
11.2	Medical professional liability - claims-made	29	4,475,000	13,666,629		57,867,019	20,595,434	61.1
12.	Earthquake			0	0		0	0.0
13.	Group accident and health			0	0		0	0.0
14.	Credit accident and health (group and individual)			0	0		0	0.0
15.	Other accident and health			0	0		0	0.0
16.	Workers' compensation			0	0		0	0.0
17.1	Other liability - occurrence	55		15,055	523,158	667,666	(129,453)	(16.6)
17.2	Other liability - claims-made	78	37,978	0	0		0	0.0
17.3	Excess workers' compensation			0	0		0	0.0
18.1	Products liability - occurrence			0	0		0	0.0
18.2	Products liability - claims-made			0	0		0	0.0
	Private passenger auto liability			l0	0		0	0.0
19.3, 19.4	Commercial auto liability			l0	0		0	0.0
21.	Auto physical damage			0	0		0	0.0
	Aircraft (all perils)			0	0		0	0.0
23.	Fidelity			0	0		0	0.0
24.	Surety			0	0		0	0.0
26.	Burglary and theft			0	0		0	0.0
27.	Boiler and machinery			0	0		n	0.0
28.	Credit.			n	n		n	
29.	International			n	n		n	0.0
30.	Warranty			n	n		n	0.0
31.	Reinsurance - nonproportional assumed property			n	n		n	0.0
32.	Reinsurance - nonproportional assumed liability			n	n		n	0.0
33.	Reinsurance - nonproportional assumed financial lines			n	Λ		n	0.0
33. 34.	Aggregate write-ins for other lines of business	0	n		Λ	Λ	۰۰۰۰	0.0
34. 35.	TOTALS	62	04,512,978	14,556,684	69,882,302	63,194,706	21,244,280	59.4
აა.	101ALS	UZ		14,000,004	03,002,302	03,194,700		39.4
2404			DETAILS OF WRITE-INS	1	^		^	0.0
3401.				0	0		0	
3402.				1	0		U	0.0
3403.				10	0]0	0.0
3498.	Summary of remaining write-ins for Line 34 from overflow page		U 0]0	0	0]0	XXX
3499.	Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)		U 0	0	0	0	0	0.0

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2A - UNPAID LOSSES AND LOSS ADJUSTMENT EXPENSES

PART 2A - UNPAID LOSSES AND LOSS ADJUSTMENT EXPENSES Reported Losses Incurred But Not Reported 8					8	q				
		1 1	2	3	4	5	6	7	1	3
	Line of Business	Direct	Reinsurance Assumed	Deduct Reinsurance Recoverable	Net Losses Excluding Incurred but not Reported (Cols. 1 + 2 - 3)	Direct	Reinsurance Assumed	Reinsurance Ceded	Net Losses Unpaid (Cols. 4 + 5 + 6 - 7)	Net Unpaid Loss Adjustment Expenses
1.	Fire				0				0	
2.	Allied lines.				0				0	
3.	Farmowners multiple peril				0				0	
4.	Homeowners multiple peril				0				0	
5.	Commercial multiple peril				0				0	
6.	Mortgage guaranty				0				0	
8.	Ocean marine				0				0	
9.	Inland marine				0				0	
10.	Financial guaranty				0				0	
11.1	Medical professional liability - occurrence	2,229,000		250,000	1,979,000	3,034,102		449,782	4,563,320	1,317,562
	Medical professional liability - claims-made	35,010,716		3,005,000	32,005,716			18,022,200	64,795,824	23,218,785
12.	Earthquake				0				0	
13.	Group accident and health				0				(a)0	
14.	Credit accident and health (group and individual)				0				0	
15.	Other accident and health				0				(a)0	
16.	Workers' compensation				0				0	
	Other liability - occurrence	337,775			337,775	185,383			523,158	273,423
	Other liability - claims-made	41,023		41,023	0	12,308		12,308		656,767
	Excess workers' compensation				0	12,000		12,300	0	000,707
	Products liability - occurrence				Λ					
	Products liability - claims-made									
	Private passenger auto liability				n					
	Commercial auto liability									
	Auto physical damage				Λ					
	Aircraft (all perils)				۰					
23.	Fidelity.				Λ					
23. 24.	Surety									
26.	Burglary and theft									
27.	Boiler and machinery									
28.	Credit.				0				0	
29.	International									
					0				0	
30.	Warranty	XXX]0	XXX			0	
31.	Reinsurance - nonproportional assumed property	XXX]0	XXXXXX			0	
	Reinsurance - nonproportional assumed liability]ū	XXX			0	
33.	Reinsurance - nonproportional assumed financial lines]0	XXX			0	
34.	Aggregate write-ins for other lines of business		0		34,322,491	54.044.101	0		69,882,302	
35.	TOTALS	37,618,514	0	3,296,023		54,044,101	0	18,484,290	69,882,302	25,466,537
0404		I		DETAILS OF V		T		1	1	<u> </u>
3401.					0				0	
					0				0	
3403.				-	J0				0	
	Summary of remaining write-ins for Line 34 from overflow page	0	0	•	0		0		0	0
3499.	Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)	0	0	0	0	0	0	0]0	J

(a) Including \$......0 for present value of life indemnity claims.

PART 3 - EXPENSES

	PARI	3 - EXPENSES			
		1 Loss Adjustment	2 Other Underwriting	3 Investment	4
		Expenses	Expenses	Expenses	Total
1.	Claim adjustment services:	4 770 570			4 770 570
	1.1 Direct	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			, ,,,,
	1.2 Reinsurance assumed				
	1.3 Reinsurance ceded	,			,
•	,		0	0	1,652,899
2.	Commission and brokerage:		0.000.000		0.000.000
	2.1 Direct, excluding contingent				
	2.2 Reinsurance assumed, excluding contingent				ĺ
	2.3 Reinsurance ceded, excluding contingent				, , , , , ,
	2.4 Contingent - direct				-
	2.5 Contingent - reinsurance assumed				
	2.6 Contingent - reinsurance ceded				
	2.7 Policy and membership fees				
	2.8 Net commission and brokerage (2.1 + 2.2 - 2.3 + 2.4 + 2.5 - 2.6 + 2.7)				
3.	Allowances to manager and agents				
4.	Advertising				
5.	Boards, bureaus and associations		,		· ·
6.	Surveys and underwriting reports				
7.	Audit of assureds' records				0
8.	Salary and related items:				
	8.1 Salaries				
	8.2 Payroll taxes		260,767	5,082	ĺ
9.	Employee relations and welfare	,	1,057,545	20,611	
10.	Insurance	· ·		4,187	
11.	Directors' fees	, , , ,	·	7,246	·
12.	Travel and travel items	·	166,559	3,146	,
13.	Rent and rent items	·	252,674	4,925	· · · · · · · · · · · · · · · · · · ·
14.	Equipment	·		862	
15.	Cost or depreciation of EDP equipment and software			10,455	
16.	Printing and stationery				
17.	Postage, telephone and telegraph, exchange and express				
18.	Legal and auditing		201,995	496,977	819,809
19.	Totals (Lines 3 to 18)	2,799,978	7,668,808	642,834	11,111,620
20.	Taxes, licenses and fees:				
	20.1 State and local insurance taxes deducting guaranty association credits				
	of \$0.		,		821,034
	20.2 Insurance department licenses and fees				34,147
	20.3 Gross guaranty association assessments		19,418		19,418
	20.4 All other (excluding federal and foreign income and real estate)		·		·
	20.5 Total taxes, licenses and fees (20.1 + 20.2 + 20.3 + 20.4)	0	911,847	0	911,847
21.	Real estate expenses				0
22.	Real estate taxes				0
23.	Reimbursements by uninsured plans				
24.	Aggregate write-ins for miscellaneous expenses	63,405	646,744	13,822	723,971
25.	Total expenses incurred	4,516,282	9,807,052	656,656	(a)14,979,990
26.	Less unpaid expenses - current year	25,466,537	751,239	137,990	26,355,766
27.	Add unpaid expenses - prior year	28,890,763	1,938,558	131,257	30,960,578
28.	Amounts receivable relating to uninsured plans, prior year				0
29.	Amounts receivable relating to uninsured plans, current year				0
30.	TOTAL EXPENSES PAID (Lines 25 - 26 + 27 - 28 + 29)	7,940,508	10,994,371	649,923	19,584,802
		AILS OF WRITE-INS			
401.	Miscellaneous Expense	63,405	646,744	13,822	723,971
≀U I.	INISCEIIAITEUUS EXPETISE		040,744	13,822	123,97

2401.	Miscellaneous Expense	63,405	646,744	13,822	723,971
2402.					0
2403.					0
2498.	Summary of remaining write-ins for Line 24 from overflow page	0	0	0	0
2499.	Totals (Lines 2401 through 2403 plus 2498) (Line 24 above)	63,405	646,744	13,822	723,971

⁽a) Includes management fees of \$......0 to affiliates and \$......0 to non-affiliates.

Annual Statement for the year 2018 of the Medical Mutual Insurance Company of Maine **EXHIBIT OF NET INVESTMENT INCOME**

		1	1		2	
			Collected		Z Earned	
			During Year		During Year	
1.	U.S. government bonds.	(2)	1,510,859			
1.1	Bonds exempt from U.S. tax.	` '	2,515,370		2,622,839	
	Other bonds (unaffiliated)	` '	3,444,727		3.445.255	
1.3	Bonds of affiliates	` '			,440,200	
2.1	Preferred stocks (unaffiliated).					
	Preferred stocks of affiliates.	(- /				
		` '	896.855		015 104	
	Common stocks (unaffiliated)		,		915,104	
	Common stocks of affiliates					
3.	Mortgage loans	` '				
4.	Real estate	(- /				
5.	Contract loans					
6.	Cash, cash equivalents and short-term investments	١ /	171,868		171,868	
7.	Derivative instruments	` '				
8.	Other invested assets					
9.	Aggregate write-ins for investment income				0	
10.	Total gross investment income					
11.	Investment expenses				656,656	
12.	Investment taxes, licenses and fees, excluding federal income taxes			(0)		
13.	Interest expense			` '		
14.	Depreciation on real estate and other invested assets			(i)	0	
15.	Aggregate write-ins for deductions from investment income				0	
16.	Total deductions (Lines 11 through 15)			656,656		
17.	Net investment income (Line 10 minus Line 16)				8,020,764	
	DETAILS OF WRITE-INS	_				
0901.						
0902.						
0903.						
0998.	Summary of remaining write-ins for Line 9 from overflow page		0		0	
	Totals (Lines 0901 through 0903 plus 0998) (Line 9 above)				0	
1501.						
1502.						
1503.						
1598.	Summary of remaining write-ins for Line 15 from overflow page				0	
	Totals (Lines 1501 through 1503 plus 1598) (Line 15 above)				0	
(a)	Includes \$513,022 accrual of discount less \$749,347 amortization of premium and less \$202,929 paid for accru				-	
(b)	Includes \$0 accrual of discount less \$0 amortization of premium and less \$0 paid for accrued dividen		•			
(c)	Includes \$0 accrual of discount less \$0 amortization of premium and less \$0 paid for accrued interest					
(d)	Includes \$0 for company's occupancy of its own buildings; and excludes \$0 interest on encumbrances.					
(e)	Includes \$156,339 accrual of discount less \$0 amortization of premium and less \$0 paid for accrued inte	erest on nu	rchases.			
(f)	Includes \$0 accrual of discount less \$0 amortization of premium.	50. on pu				
(ı) (g)	Includes \$0 investment expenses and \$0 investment taxes, licenses and fees, excluding federal income tax	res attribu	table to segregated and S	enarate	Accounts	
(b)	Includes \$0 interest on surplus notes and \$0 interest on capital notes.	.55, 4111154	to oogrogatoa aria c	Sparato I		
(i)	Includes \$0 depreciation on real estate and \$0 depreciation on other invested assets.					
(1)	iniciados y doprociation on roal estate and y doprociation on other invested assets.					

EXHIBIT OF CAPITAL GAINS (LOSSES)

LAHIDI	I OF CAPITA	AL GAINS (F	.UUULU/		
	1	2	3	4	5
	Realized				Change in
	Gain (Loss)	Other	Total Realized	Change in	Unrealized
	on Sales	Realized	Capital Gain (Loss)	Unrealized	Foreign Exchange
	or Maturity	Adjustments	(Columns 1 + 2)	Capital Gain (Loss)	Capital Gain (Loss)
U.S. government bonds	25,819		25,819		
1.1 Bonds exempt from U.S. tax	(758,300)		(758,300)		
1.2 Other bonds (unaffiliated)	64,552		64,552		
1.3 Bonds of affiliates			0		
2.1 Preferred stocks (unaffiliated)			0		
2.11 Preferred stocks of affiliates			0		
2.2 Common stocks (unaffiliated)	3,283,169	(194,268)	3,088,901	(7,027,747)	
2.21 Common stocks of affiliates			0		
3. Mortgage loans			0		
4. Real estate			0		
5. Contract loans					
6. Cash, cash equivalents and short-term investments	(950)		(950)		
7. Derivative instruments			0		
Other invested assets		7,296	7,296		
Aggregate write-ins for capital gains (losses)	0	0	0	0	0
10. Total capital gains (losses)	2,614,291	(186,972)	2,427,319	(7,027,747)	0
	DETAILS O	F WRITE-INS			
0901			0		
0902			0		
0903.			0		
	0	0	0	0	0
0999. Totals (Lines 0901 through 0903 plus 0998) (Line 9 above)		0	0	0	0

${\scriptsize \textbf{Annual Statement for the year 2018 of the}} \ \ \textbf{Medical Mutual Insurance Company of Maine}$ **EXHIBIT OF NONADMITTED ASSETS**

		1 Current Year Total Nonadmitted Assets	2 Prior Year Total Nonadmitted Assets	3 Change in Total Nonadmitted Assets (Col. 2 - Col. 1)
1.	Bonds (Schedule D)			0
2.	Stocks (Schedule D):			
	2.1 Preferred stocks			0
	2.2 Common stocks			0
3.	Mortgage loans on real estate (Schedule B):			
	3.1 First liens			0
	3.2 Other than first liens			
4.	Real estate (Schedule A):			
	4.1 Properties occupied by the company			0
	4.2 Properties held for the production of income			
	4.3 Properties held for sale			
5.	Cash (Schedule E-Part 1), cash equivalents (Schedule E-Part 2)			0
J.	and short-term investments (Schedule DA)			0
6.	Contract loans.			
7.	Derivatives (Schedule DB)			
8.	Other invested assets (Schedule BA)			
9.	Receivables for securities.			
	Securities lending reinvested collateral assets (Schedule DL)			
11.	Aggregate write-ins for invested assets			
12.	Subtotals, cash and invested assets (Lines 1 to 11)	1,000	0	(1,000)
13.	Title plants (for Title insurers only)			0
14.	Investment income due and accrued			0
15.	Premiums and considerations:			
	15.1 Uncollected premiums and agents' balances in the course of collection	1,494	1,102	(392)
	15.2 Deferred premiums, agents' balances and installments booked but			
	deferred and not yet due			0
	15.3 Accrued retrospective premiums and contracts subject to redetermination			0
16.	Reinsurance:			
	16.1 Amounts recoverable from reinsurers			0
	16.2 Funds held by or deposited with reinsured companies			0
	16.3 Other amounts receivable under reinsurance contracts			0
17.	Amounts receivable relating to uninsured plans			0
	Current federal and foreign income tax recoverable and interest thereon			
	Net deferred tax asset			
	Guaranty funds receivable or on deposit			
	Electronic data processing equipment and software			
	Furniture and equipment, including health care delivery assets			
21.				
	Net adjustment in assets and liabilities due to foreign exchange rates			
23.	Receivables from parent, subsidiaries and affiliates			
	Health care and other amounts receivable			
	Aggregate write-ins for other-than-invested assets	326,038	407,563	81,525
26.	Total assets excluding Separate Accounts, Segregated Accounts and Protected		_,,_,	
	Cell Accounts (Lines 12 through 25)			
	From Separate Accounts, Segregated Accounts and Protected Cell Accounts			
28.	TOTALS (Lines 26 and 27)	618,729	716,716	97,987
	DETAILS OF W	RITE-INS	T	
1101.				0
1102.				0
1103.				0
1198.	Summary of remaining write-ins for Line 11 from overflow page	0	0	0
	Totals (Lines 1101 through 1103 plus 1198) (Line 11 above)			
	OTHER RECEIVABLES			
	NON VESTED PENSION BENEFITS	·		•
	NON VESTED FENSION BENEFITS			
	Summary of remaining write-ins for Line 25 from overflow page			
2599.	Totals (Lines 2501 through 2503 plus 2598) (Line 25 above)	326,038	407,563	81,525

NOTE 1 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES AND GOING CONCERN

A. Accounting Practices

		SSAP	F/S	F/S		
		#	Page	Line #	2018	2017
NE	INCOME					
(1)	Company state basis (Page 4, Line 20, Columns 1 & 2)	XXX	XXX	XXX	\$ 7,496,678	\$ 6,446,629
(2)	State Prescribed Practices that are an increase/(decrease) from NAIC SAP					
					\$	\$
(3)	State Permitted Practices that are an increase/(decrease) from NAIC SAP					
					\$	\$
(4)	NAIC SAP (1-2-3=4)	XXX	XXX	XXX	\$ 7,496,678	\$ 6,446,629
SUF	RPLUS					
(5)	Company state basis (Page 3, Line 37, Columns 1 & 2)	XXX	XXX	XXX	\$ 180,379,734	\$ 178,308,965
(6)	State Prescribed Practices that are an increase/(decrease) from NAIC SAP					
					\$	\$
(7)	State Permitted Practices that are an increase/(decrease) from NAIC SAP					
					\$	\$
(8)	NAIC SAP (5 – 6 – 7 = 8)	XXX	XXX	XXX	\$ 180,379,734	\$ 178,308,965

B. Use of Estimates in the Preparation of the Financial Statement

The preparation of financial statements in conformity with Statutory Accounting Principles requires management to make estimates and assumptions that affect the reported amount of assets and liabilities. It also requires estimates in the disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of the revenue and expenses during the period. The most significant estimates affecting the Company's financial statements involve the estimation of future indemnity losses and loss adjustment expenses to be incurred by the Company and the level of reserves required to adequately cover the estimate. Actual results could differ from these estimates.

C. Accounting Policy

Direct and ceded premiums are earned over the terms of related insurance policies and reinsurance contracts. Unearned premium reserves are established to cover the unexpired portion of premiums written. Such reserves are computed by pro rata methods for direct and ceded business.

Expenses incurred in connection with acquiring new insurance business, including acquisition costs such as sales commissions, are charged to operations as incurred. Expenses incurred are reduced for ceding allowances received or receivable.

Net investment income earned consists primarily of interest and dividend income, less investment related expense. Interest income is recognized on an accrual basis and dividends are recognized on an ex-dividend basis. Net realized capital gains (losses) are recognized on a first in-first out basis when securities are sold, redeemed, or otherwise disposed of. Realized capital losses include writedowns for impairments considered to be other than temporary.

In addition, the Company uses the following accounting policies:

- (1) Investments with maturities of less than one year at the time of acquisition are considered short-term investments and are stated at amortized cost using the interest method. Non-investment grade short-term investments are stated at the lower of amortized cost or fair value.
- (2) Investment grade bonds not backed by other loans are stated at amortized cost using the interest method. Non-investment grade bonds with NAIC designations of 3 through 6 are stated at the lower of amortized cost or fair value. Declines in market values that are determined to be other than temporary are recorded as realized losses. The new cost basis is not changed for subsequent recoveries. See paragraph (6) for loan-backed structured securities.
- (3) Common stocks, other than investments in subsidiaries and affiliates, are stated at fair value. Declines in market values that are determined to be other than temporary are recorded as realized losses. The new cost basis is not changed for subsequent recoveries.
- (4) Stated Basis of Preferred Stock

Not Applicable

(5) Valuation of Mortgage Loans

Not Applicable

(6) Investment grade loan-backed securities are stated at amortized cost. The retrospective adjustment method is used to value all loan-backed securities. Non-investment grade loan-backed securities are stated at the lower of amortized cost or fair value.

The carrying value and final NAIC designation for non-agency residential mortgage-backed securities are determined using a special two-step NAIC process. Those assigned an NAIC designation in the first step of 1 or 2 are stated at amortized cost and those assigned a 3 through 6 designation are stated at the lower of amortized cost or fair value. The NAIC designation assigned under the second step of the process is reported for these securities in Schedule D and is used in the risk-based capital calculation.

(7) Investment in the Company's single subsidiary (non-insurance) is stated at GAAP equity value.

(8) Investments in joint ventures and partnerships

Not Applicable

(9) Derivatives

Not Applicable

- (10) The Company anticipates investment income as a factor when evaluating the need for premium deficiency reserves (see Note 30).
- (11) Reserves for unpaid losses and loss adjustment expenses include an amount determined from individual case estimates and an amount, based on past experience (adjusted for expected changes in factors potentially affecting future losses), for losses incurred but not reported. Such liabilities are necessarily based on assumptions and estimates and while management believes reported reserves are adequate, the ultimate liability may be in excess of, or less than, the amounts provided. The methods for making such estimates and for establishing the resulting liabilities are continually reviewed and any adjustments are reflected in the period determined.
- (12) The Company has a written capitalization policy for purchases of fixed assets. The predefined capitalization thresholds under this policy have not changed from those of the prior year.
- (13) Method to Estimate Pharmaceutical Rebate Receivables

Not Applicable

D. Going Concern

Based upon its evaluation of relevant conditions and events, management does not have a substantial doubt about the Company's ability to continue as a going concern.

NOTE 2 - ACCOUNTING CHANGES AND CORRECTIONS OF ERRORS

Not Applicable

NOTE 3 – BUSINESS COMBINATIONS AND GOODWILL

Not Applicable

NOTE 4 - DISCONTINUED OPERATIONS

Not Applicable

NOTE 5 - INVESTMENTS

A. Mortgage Loans, including Mezzanine Real Estate Loans

Not Applicable

B. Debt Restructuring

Not Applicable

C. Reverse Mortgage

Not Applicable

- D. Loan-Backed Securities
 - (1) Prepayment assumptions for loan-backed and structured securities were obtained from broker dealer survey values or internal estimates.
 - (2) The Company did not recognize any other-than-temporary impairments (OTTI) on loan-backed or structured securities during the period.
 - (3) The Company did not hold any loan-backed or structured securities with OTTI at the end of the current period.
 - (4) The following table summarizes unrealized losses on loan-backed securities and structured securities by the length of time that the securities have continuously been in unrealized loss positions:

a.	The aggregate amount of unrealized losses:	1. Less than 12 Months	\$ 78,996
		2. 12 Months or Longer	\$ 160,209
b.	The aggregate related fair value of securities with unrealized losses:	1. Less than 12 Months	\$ 15,119,581
		2. 12 Months or Longer	\$ 9.192.507

(5) All loan-backed and structured securities in an unrealized loss position were reviewed to determine whether an OTTI should be recognized. As of the end of the current period, the Company asserts that it has the intent and believes that it has the ability to hold these securities long enough to allow the cost basis of these securities to be recovered. Unrealized losses are primarily attributable to credit spread widening and increased liquidity discounts. It is possible that the Company could recognize OTTI in the future on some of the securities held at the end of the current period if future events, information and the passage of time cause it to conclude that declines in value are other than temporary.

- E. Dollar Repurchase Agreements and/or Securities Lending Transactions
 Not Applicable
- F. Repurchase Agreements Transactions Accounted for as Secured Borrowing Not Applicable
- G. Reverse Repurchase Agreements Transactions Accounted for as Secured Borrowing Not Applicable
- Repurchase Agreements Transactions Accounted for as a Sale
 Not Applicable
- Reverse Repurchase Agreements Transactions Accounted for as a Sale Not Applicable
- J. Real EstateNot Applicable
- K. Low-Income Housing Tax Credits (LIHTC)Not Applicable
- L. Restricted Assets
 - (1) Restricted Assets (Including Pledged)

			Gross	(Admitted &	Nonadmitted)	Restricted				Current	t Year		
1				Current			6	7	8	9	Percentage		
		1	2	3	4	5			-		10	11	
	Restricted Asset Category	Total General Account (G/A)	G/A Supporting Protected Cell Account Activity (a)	Total Protected Cell Account Restricted Assets	Protected Cell Account Assets Supporting G/A Activity (b)	Total (1 plus 3)	Total From Prior Year	Increase/ (Decrease) (5 minus 6)	Total Nonadmitted Restricted	Total Admitted Restricted (5 minus 8)	Gross (Admitted & Nonadmitted) Restricted to Total Assets (c)	Admitted Restricted to Total Admitted Assets (d)	
a.	Subject to contractual obligation for which liability is not shown	\$	\$	\$	\$	\$	\$	\$	\$	\$	%	%	
b.	Collateral held under security lending arrangements										%	%	
C.	Subject to repurchase agreements										%	%	
d.	Subject to reverse repurchase agreements										%	%	
e.	Subject to dollar repurchase agreements										%	%	
f.	Subject to dollar reverse repurchase agreements										%	%	
g.	Placed under option contracts										%	%	
h.	Letter stock or securities restricted as to sale – excluding FHLB capital stock										%	%	
i.	FHLB capital stock										%	%	
j.	On deposit with states	198,482				198,482	197,709	773		198,482	0.1%	0.1%	
k.	On deposit with other regulatory bodies										%	%	
I.	Pledged as collateral to FHLB (including assets backing funding agreements)										%	%	
m.	Pledged as collateral not captured in other categories										%	%	
n.	Other restricted										%	%	
0.	assets Total Restricted Assets	\$ 198,482	\$	\$	\$	\$ 198,482	\$ 197,709	\$ 773	\$	\$ 198,482	0.1%	0.1%	

- (a) Subset of column 1
- (b) Subset of column 3
- (c) Column 5 divided by Asset Page, Column 1, Line 28
- (d) Column 9 divided by Asset Page, Column 3, Line 28
- (2) Detail of Assets Pledged as Collateral Not Captured in Other Categories (Contracts that Share Similar Characteristics, Such as Reinsurance and Derivatives, are Reported in the Aggregate)

Not Applicable

(3) Detail of Other Restricted Assets (Contracts that Share Similar Characteristics, such as Reinsurance and Derivatives, are Reported in the Aggregate)

Not Applicable

- (4) Collateral Received and Reflected as Assets Within the Reporting Entity's Financial Statements Not Applicable
- M. Working Capital Finance Investments

Not Applicable

N. Offsetting and Netting of Assets and Liabilities

Not Applicable

O. Structured Notes

Not Applicable

P. 5GI Securities

Not Applicable

Q. Short Sales

Not Applicable

R. Prepayment Penalty and Acceleration Fees

The Company had three bonds called during the year which included prepayment penalties of \$176,609.

		General Account	Protected Cell
(1)	Number of CUSIPs	3	
(2)	Aggregate Amount of Investment Income	\$ 176,609	\$

NOTE 6 – JOINT VENTURES, PARTNERSHIPS AND LIMITED LIABILITY COMPANIES

A. Detail for Those Greater than 10% of Admitted Assets

Not Applicable

B. Writedowns for Impairment of Joint Ventures, Partnerships and LLCs

Not Applicable

NOTE 7 – INVESTMENT INCOME

A. Accrued Investment Income

The Company does not admit investment income due and accrued if amounts are over 90 days past due (180 days for mortgage loans).

B. Amounts Nonadmitted

Not Applicable

NOTE 8 - DERIVATIVE INSTRUMENTS

Not Applicable

NOTE 9 - INCOME TAXES

A. Deferred Tax Assets/(Liabilities)

1. Components of Net Deferred Tax Asset/(Liability)

		2018			2017			Change	
	1	2	3	4	5	6	7	8	9
			(Col 1+2)			(Col 4+5)	(Col 1-4)	(Col 2-5)	(Col 7+8)
	Ordinary	Capital	Total	Ordinary	Capital	Total	Ordinary	Capital	Total
 a. Gross deferred tax assets 	\$ 3,271,171	\$ 332,590	\$ 3,603,761	\$ 3,385,885	\$ 300,231	\$ 3,686,116	\$ (114,714)	\$ 32,359	\$ (82,355)
b. Statutory valuation allowance adjustment									
c. Adjusted gross deferred tax assets (1a-1b)	\$ 3,271,171	\$ 332,590	\$ 3,603,761	\$ 3,385,885	\$ 300,231	\$ 3,686,116	\$ (114,714)	\$ 32,359	\$ (82,355)
d. Deferred tax assets nonadmitted									
e. Subtotal net admitted deferred									
tax asset (1c-1d)	\$ 3,271,171	\$ 332,590	\$ 3,603,761	\$ 3,385,885	\$ 300,231	\$ 3,686,116	\$ (114,714)	\$ 32,359	(82,355)
f. Deferred tax liabilities	1,276,478	3,460,010	4,736,488	1,315,059	5,157,081	6,472,140	(38,581)	(1,697,071)	(1,735,652)
g. Net admitted deferred tax assets/(net deferred	¢ 1.004.603	¢ (2.427.420)	₾ /4 420 707\	¢ 2.070.926	¢ (4.956.950)	¢ (2.796.024)	¢ (76.122)	¢ 4.700.420	¢ 4.652.207
tax liability) (1e-1f)	\$ 1,994,693	\$ (3,127,420)	\$ (1,132,727)	\$ 2,070,826	\$ (4,856,850)	\$ (2,786,024)	\$ (76,133)	\$ 1,729,430	\$ 1,653,297

2. Admission Calculation Components SSAP No. 101

		2018			2017				
	1	2	3	4	5	6	7	8	9
			(Col 1+2)			(Col 4+5)	(Col 1-4)	(Col 2-5)	(Col 7+8)
	Ordinary	Capital	Total	Ordinary	Capital	Total	Ordinary	Capital	Total
a. Federal income taxes paid in prior years recoverable through loss carrybacks	\$ 2,827,284	\$	\$ 2,827,284	\$ 2,712,880	\$	\$ 2,712,880	\$ 114,404	\$	\$ 114,404
b. Adjusted gross deferred tax assets expected to be realized (excluding the amount of deferred tax assets from 2(a) above) after application of the threshold limitation. (The lesser of 2(b)1 and 2(b)2 below) 1. Adjusted gross deferred tax assets expected to be realized following the balance sheet									
2. Adjusted gross deferred tax assets allowed per limitation threshold			27,023,027			26,730,153			292,874
c. Adjusted gross deferred tax assets (excluding the amount of deferred tax assets from 2(a) and 2(b) above) offset by gross deferred tax liabilities	443,887	332,590	776,477	673,005	300,231	973,236	(229,118)	32,359	(196,759)
d. Deferred tax assets admitted as the result of application of SSAP 101. Total (2(a)+2(b)+2(c))	\$ 3,271,171			\$ 3,385,885	\$ 300,231	\$ 3,686,116	\$ (114,714)		
(Z(a)+Z(D)+Z(C))	\$ 3,2/1,1/1	j 332,590	\$ 3,6U3,761		j\$ 300,231	j	φ (114,/14)	φ 32,359	

3. Other Admissibility Criteria

		2018	20)17
a.	Ratio percentage used to determine recovery period and threshold limitation amount	2,007.0%		1,880.0%
b.	Amount of adjusted capital and surplus used to determine recovery period and threshold			
	limitation in 2(b)2 above	\$ 180,153,512	\$	178,201,022

4. Impact of Tax Planning Strategies

(a) Determination of adjusted gross deferred tax assets and net admitted deferred tax assets, by tax character as a percentage.

		2018			2017	,		Change	
	1		2		3		4	5	6
								(Col. 1-3)	(Col. 2-4)
	Ordinary		Capital		Ordinary		Capital	Ordinary	Capital
Adjusted gross DTAs amount from Note									
9A1(c)	\$ 3,271,	171 \$	332,590	\$	3,385,885	\$	300,231	\$ (114,714)	\$ 32,359
Percentage of adjusted gross DTAs by tax character attributable to the impact of tax planning									
strategies		%	100.0%		%	,	100.0%	%	%
Net Admitted Adjusted Gross DTAs amount from Note 9A1(e)	\$ 3,271,	171 \$	332,590	\$	3,385,885	\$	300,231	\$ (114,714)	\$ 32,359
4 Percentage of net admitted adjusted gross DTAs by tax character admitted because of the impact of tax planning									
strategies		%	100.0%	l	%		100.0%	%	%

(b) Does the company's tax planning strategies include the use of reinsurance? NO

B. Deferred Tax Liabilities Not Recognized

Not Applicable

C. Current and Deferred Income Taxes

1. Current Income Tax

	1	2	3
			(Col 1-2)
	2018	2017	Change
a. Federal	\$ 907,521	\$ 1,256,872	\$ (349,351)
b. Foreign	\$	\$	\$
c. Subtotal	\$ 907,521	\$ 1,256,872	\$ (349,351)
d. Federal income tax on net capital gains	\$ 761,808	\$ 568,627	\$ 193,181
e. Utilization of capital loss carry-forwards	\$	\$	\$
f. Other	\$	\$	\$
g. Federal and Foreign income taxes incurred	\$ 1,669,329	\$ 1,825,499	\$ (156,170)

2. Deferred Tax Assets

	1	2	3
	2018	2017	(Col 1-2) Change
a. Ordinary:			
Discounting of unpaid losses	\$ 1,613,403	\$ 1,567,599	\$ 45,804
Unearned premium reserve	774,313	935,312	(160,999)
Policyholder reserves			
4. Investments			
Deferred acquisition costs			
Policyholder dividends accrual			
7. Fixed assets			
Compensation and benefits accrual	788,254	750,776	37,478
Pension accrual			
10. Receivables - nonadmitted			
11. Net operating loss carry-forward			
12. Tax credit carry-forward			
13. Other (items <=5% and >5% of total ordinary tax assets)	95,201	132,198	(36,997)
Other (items listed individually >5%of total ordinary tax assets)			
99. Subtotal	3,271,171	3,385,885	(114,714)
b. Statutory valuation allowance adjustment			
c. Nonadmitted			
d. Admitted ordinary deferred tax assets (2a99-2b-2c)	3,271,171	3,385,885	(114,714)
e. Capital:	-		
1. Investments	\$ 332,590	\$ 300,231	\$ 32,359
Net capital loss carry-forward			
3. Real estate			
4. Other (items <=5% and >5% of total capital tax assets)			
Other (items listed individually >5% of total capital tax assets)	_		_
99. Subtotal	\$ 332,590	\$ 300,231	\$ 32,359
f. Statutory valuation allowance adjustment			
g. Nonadmitted			
h. Admitted capital deferred tax assets (2e99-2f-2g)	332,590		32,359
i. Admitted deferred tax assets (2d+2h)	\$ 3,603,761	\$ 3,686,116	\$ (82,355)

3. Deferred Tax Liabilities

		1	2	3
				(Col 1-2)
		2018	2017	Change
a.	Ordinary:			
	1. Investments	\$ 495,960	\$ 454,545	\$ 41,415
	2. Fixed assets	63,573	41,149	22,424
	Deferred and uncollected premium			
	Policyholder reserves			
	5. Other (items <=5% and >5% of total ordinary tax liabilities)	716,945	819,365	(102,420)
	Other (items listed individually >5% of total ordinary tax liabilities)			
	99. Subtotal	1,276,478	1,315,059	(38,581)
b.	Capital:			
	1. Investments	3,460,010	5,157,081	(1,697,071)
	2. Real estate			
	3. Other (Items <=5% and >5% of total capital tax liabilities)			
	Other (items listed individually >5% of total capital tax liabilities)		•	
	99. Subtotal	3,460,010	5,157,081	(1,697,071)
C.	Deferred tax liabilities (3a99+3b99)	\$ 4,736,488	\$ 6,472,140	\$ (1,735,652)

(2,786,024) \$

1,653,297

4. Net Deferred Tax Assets (2i – 3c) \$\((1,132,727)\)\$

D. Reconciliation of Federal Income Tax Rate to Actual Effective Rate Among the more significant book to tax adjustments were the following:

	Amount	Effective Tax Rate (%)
Permanent Differences:		
Provision computed at statutory rate	\$ 1,923,33	29 21.0%
Proration of tax exempt investment income	143,29	90 1.5%
Tax exempt income deduction	(506,29	90) (5.5)%
Dividends received deduction	(66,8	70) (0.7)%
Disallowed travel and entertainment	4,80	0.1%
Other permanent differences	7,54	41 0.1%
Temporary Differences:		
Total ordinary DTAs		%
Total ordinary DTLs		%
Total capital DTAs		%
Total capital DTLs	221,24	14 2.4%
Other:	·	
Statutory valuation allowance adjustment		%
Accrual adjustment – prior year	(13,94	14) (0.2)%
Other		%
Totals	1,713,10	02 18.7%
Federal and foreign income taxes incurred	907,52	21 9.9%
Realized capital gains (losses) tax	761,80	08 8.3%
Change in net deferred income taxes	43,77	73 0.5%
Total statutory income taxes	\$ 1,713,10	02 18.7%

- E. Operating Loss Carryforwards and Income Taxes Available for Recoupment
 - 1. The amounts, origination dates and expiration dates of operating loss and tax credit carryforwards available for tax purposes:

Description (Operating Loss or Tax Credit Carry	Amounts	Origination Dates	Expiration Dates
Forward)			
NONE	\$		

2. The following is income tax expense for current year and proceeding years that is available for recoupment in the event of future net losses:

	Amounts	
2018		\$1,683,273
2017		\$1,825,867

- 3. The Company did not have any protective tax deposits under Section 6603 of the Internal Revenue Code.
- F. Consolidated Federal Income Tax Return
 - 1. The Company's federal income tax return is consolidated with the following entities:
 - Specialty Insurance Placement Services, LLC
 - 2. The manner in which the Board of Directors sets forth for allocating the consolidated federal income tax:

Allocation is made primarily on a separate return basis with current credit for any net operating losses or other items utilized in the consolidated return.

G. Federal or Foreign Federal Income Tax Loss Contingencies:

The Company does not have any tax loss contingencies for which it is reasonably possible that the total liability will significantly increase within twelve months of the reporting date.

H. Repatriation Transition Tax (RTT) - RTT owed under the TCJA

Not Applicable

Alternative Minimum Tax (AMT Credit)

Not Applicable

NOTE 10 - INFORMATION CONCERNING PARENT, SUBSIDIARIES, AFFILIATES AND OTHER RELATED PARTIES

A. Nature of Relationships

The Company's wholly-owned subsidiary, MMIC Services Company, LLC was dissolved effective December 31, 2018.

The Company owns 100% of its noninsurance subsidiary, Specialty Insurance Placement Services, LLC.

The Company sponsored the creation of a risk retention group named BeaconHarbor Mutual Risk Retention Group ("BeaconHarbor") and received a surplus note from BeaconHarbor for a maximum amount of \$5,000,000, to be funded as needed. The Company has capitalized BeaconHarbor for \$1,050,000 as of the end of the current year.

B. Detail of Transactions Greater than ½% of Admitted Assets

Not Applicable

C. Changes in Terms of Intercompany Arrangements

Not Applicable

D. Amounts Due to or from Related Parties

The Company reported the following as amounts due from its subsidiaries in the current and prior years:

Related Parties	2018	2017
Specialty Insurance Placement Services, LLC	\$ 9,373	\$ 17,167
BeaconHarbor Mutual Risk Retention Group	57,443	55,471
Total	\$ 66.816	\$ 72.638

These arrangements are subject to written agreements, dated December 28, 2016, which require that intercompany balances be settled within 60 days of the end of the year.

E. Guarantees on Contingencies for Related Companies

BeaconHarbor, the Company's sponsored RRG, issued a surplus note to the Company, which is funded based on the operating needs of BeaconHarbor. Also see Note 14A.

F. Management Service Contracts, Cost Sharing Arrangements

The Company provides certain management services to subsidiary and affiliated companies under management agreements entered into with each subsidiary and affiliated company.

G. Nature of Relationships that Could Affect Operations

The Company owns 100% of all subsidiary companies. The Company reinsures its sponsored risk retention group, BeaconHarbor, and is obligated to fund surplus for BeaconHarbor, up to a maximum amount of \$5,000,000. The Company has capitalized BeaconHarbor for \$1,050,000 as of the end of the current period.

H. Amount Deducted for Investment in Upstream Company

Not Applicable

I. Detail of Investments in Affiliates Greater than 10% of Admitted Assets

Not Applicable

J. Write down for Impairments of Investments in Affiliates

Not Applicable

K. Investment in Foreign Insurance Subsidiaries Valued using CARNM

Not Applicable

L. Investment in Downstream Noninsurance Holding Company Valued Using Look-Through Method

Not Applicable

M. Non-Insurance Subsidiary, Controlled and Affiliated (SCA) Entity Valuations

Not Applicable

N. Investments in Insurance SCA Entities

Not Applicable

O. SCA Loss Tracking

Not Applicable

NOTE 11 - DEBT

A. Debt, Including Capital Notes

The Company maintains an unsecured \$2,000,000 line of credit with a local bank. There was no outstanding balance on the line of credit at the end of the current year. Interest on any outstanding balance is charged at one month LIBOR, plus 2.20%. The effective interest rate is equivalent to the stated rate. There was no interest expense incurred relative to the line of credit during the current year. The Company is required to carry a zero balance on the line of credit for 30 days within each year.

B. FHLB (Federal Home Loan Bank) Agreements

Not Applicable

NOTE 12 – RETIREMENT PLANS, DEFERRED COMPENSATION, POSTEMPLOYMENT BENEFITS AND COMPENSATED ABSENSES AND OTHER POSTRETIREMENT BENEFIT PLANS

A. Defined Benefit Plan

Not Applicable

B-D. Investment Policies and Strategies

Not Applicable

E. Defined Contribution Plans

The Company sponsors a 401(K) plan covering substantially all employees of the Company and affiliated companies. See Note 12G for further information.

F. Multiemployer Plans

Not Applicable

G. Consolidated/Holding Company Plans

The Company sponsors a 401(k) plan covering substantially all employees of the Company and affiliated companies. The plan has two components, employee funding and employer contributions. The Company elected a safe harbor fixed formula of 3% and a discretionary formula of 10% of eligible compensation up to the maximum allowable earnings prescribed under Federal regulations. Contributions are made to the plan quarterly. In 2018 and 2017, the Company expensed \$629,591 and \$595,237, respectively, for employer contributions.

The Company sponsors a non-qualified supplemental pension plan for employees who have earnings in excess of federally allowed limits for contributions to the defined contribution plan. Participants in the plan are general creditors of the Company. The Company pays participants interest at a rate tracking mutual fund returns as selected by the participants, or at Prime rate as published in the Wall Street Journal on the first business day of the calendar year, based on participants' written elections. Contributions are made quarterly, and are computed at the same rate applicable to the employer discretionary portion of the 401(k) plan. In 2018 and 2017, the Company expensed \$90,389 and \$65,975, respectively, to fund the plan, and the company credited earnings to participants totaling \$35,315 and \$81,148, respectively.

The Company sponsors a non-qualified deferred compensation plan for employees and directors. The plan allows participants to defer receipt of compensation until a future date. Participants in the plan are general creditors of the Company. The Company pays participants interest at a rate tracking mutual fund returns as selected by the participants, or at Prime rate as published in the Wall Street Journal on the first business day of the calendar year, based on participants' written elections. In 2018 and 2017, the Company credited earnings to participants totaling \$136,786 and \$105,851, respectively.

H. Postemployment Benefits and Compensated Absences

The Company has no obligations to current or former employees for benefits after termination of their employment, but before their retirement, other than for compensation related to earned vacation. The liability for earned but untaken vacation has been accrued.

I. Impact of Medicare Modernization Act on Postretirement Benefits

The Company has no obligations to former employees for benefits after their retirement.

NOTE 13 - CAPITAL AND SURPLUS, DIVIDEND RESTRICTIONS AND QUASI-REORGANIZATIONS

(1) Outstanding Shares

Not Applicable

(2) Dividend Rate of Preferred Stock

Not Applicable

(3) Dividend Restrictions

There are no restrictions for dividends paid or credited to policyholders.

(4) Dates and Amounts of Dividends Paid

Dividends are paid to policyholders as declared by the Company's Board of Directors. Dividends of \$1,495,857 and \$1,986,732 were declared in 2018 and 2017, respectively.

(5) Amount of Ordinary Dividends That May Be Paid to Stockholders

Not Applicable

(6) Restrictions on Unassigned Funds

There are no restrictions on the unassigned funds of the Company other than those described in paragraphs (3) and (5) and these unassigned funds are held for the benefit of the policyholders.

(7) Mutual Surplus Advances

Not Applicable

(8) Company Stock Held for Special Purposes

Not Applicable

(9) Changes in Special Surplus Funds

Not Applicable

(10) Changes in Unassigned Funds

The portion of unassigned funds (surplus) represented or reduced by unrealized gains and losses is \$ 17,955,518.

(11) Surplus Notes

Not Applicable

(12) Impact of Quasi-reorganizations

Not Applicable

(13) Dates of Quasi-Reorganizations

Not Applicable

NOTE 14 - LIABILITIES, CONTINGENCIES AND ASSESSMENTS

A. Contingent Commitments

(1) The Company received a surplus note from its sponsored risk retention group, BeaconHarbor, which is to be funded based on the operating needs of BeaconHarbor, up to a maximum amount of \$5,000,000. The Company capitalized BeaconHarbor for \$1,050,000 and funded it with \$50,000 operating cash. As of the end of the current year, the Company had a contingent commitment balance of \$4,950,000.

(2) Detail of Other Contingent Commitments

				Maximum Potential	
				Amount of Future	
		Liability Recognition		Payments	
		of Guarantee,		(Undiscounted) the	
		(Including Amount		Guarantor could be	
		Recognized at		Required to make	Current Status of
		Inception. If no		under the	Payment or
		Initial Recognition,	Ultimate Financial	Guarantee. If	Performance Risk of
		Document	Statement Impact if	unable to Develop	Guarantee. Also
		Exception Allowed	Action under the	an Estimate, this	Provide Additional
	Nature and Circumstances of Guarantee and Key Attributes,	Under SSAP No.	Guarantee is	Should be	Discussion as
	Including Date and Duration of Agreement	5R)	Required	Specifically Noted	Warranted
Ī			NONE		

(3) Summary of detail in 14.A.2

a.	Aggregate maximum potential of future payments of all guarantees (undiscounted) the guarantor could be required to make under guarantees. (Should equal the total of column 4 for (2) above.)	NONE
b.	Current liability recognized in F/S	NONE
	Noncontingent liabilities	
	2. Contingent liabilities	
C.	Ultimate financial statement impact if action under the guarantee is required	NONE
	1. Investments in SCA	
	2. Joint venture	
	Dividends to stockholders (capital contribution)	
	4. Expense	
	5. Other	
	6 Total (should equal (3)a)	

B. Assessments

(1) Liability and related asset

The Company is subject to guaranty fund and other assessments by the states in which it writes business (Maine, Massachusetts, New Hampshire, and Vermont). The Company has not accrued a liability for guaranty fund assessments since the assessments/benefits are paid/received concurrent with notice by the states. Guaranty fund assessments are accrued by the states at the time of insolvencies. The Company recorded an expense of \$19,418 and \$0 for guaranty fund assessments in 2018 and 2017, respectively.

The Company has no significant liability for other assessments.

(2) Rollforward of related asset

Not Applicable

C. Gain Contingencies

Not Applicable

D. Extra Contractual Obligation and Bad Faith Losses

Not Applicable

E. Product Warranties

Not Applicable

F. Joint and Several Liabilities

Not Applicable

G. All Other Contingencies

At the end of the current and prior years, the Company had admitted assets of \$16,352,222 and \$18,237,856, respectively, in premiums receivable due from policyholders. The Company routinely assesses the collectability of these receivables. Based upon Company experience, any uncollectible premiums receivable as of the end of the current year is not expected to exceed the non-admitted amount of \$1,494 and, therefore, no additional provision for uncollectible amounts has been recorded. The potential for any additional loss is not believed to be material to the Company's financial condition.

Lawsuits against the Company can arise in the normal course of business. Contingent liabilities arising from litigation, income taxes and other matters are not considered material in relation to the financial position of the Company. The Company has no contingent liability under certain structured settlement agreements (see Note 27A).

NOTE 15 - LEASES

A. Lessee Operating Lease

(1) The Company signed a new lease, effective July 1, 2013, for office space under a non-cancelable operating lease ending on December 31, 2025. Rental expense for 2018 and 2017 was \$293,079 and \$290,594, respectively.

As an incentive to sign the lease, the landlord reduced the rental rates and square footage rented prior to the expiration of the existing lease. The savings in rent expense was deferred beginning July 1, 2013, and will be amortized over the remaining lease term. There is \$411,535 and \$470,325 deferred rental savings included on the Company's balance sheet at the end of the current and prior years, respectively.

- (2) Leases with Initial or Remaining Noncancelable Lease Terms in Excess of One Year
 - a. At January 1, 2019 the minimum aggregate rental commitments are as follows:

Year Ending December 31			Operating Leases		
1.	2019	\$	333,123		
2.	2020	\$	333,123		
3.	2021	\$	333,123		
4.	2022	\$	333,123		
5.	2023	\$	333,123		
6.	Subtotal	\$	1,665,615		
7.	Thereafter	\$	666,246		
8.	Total	\$	2,331,861		

(3) The Company has not entered into any sale and leaseback arrangements.

B. Lessor Leases

Not Applicable

NOTE 16 – INFORMATION ABOUT FINANCIAL INSTRUMENTS WITH OFF-BALANCE SHEET RISK AND FINANCIAL INSTRUMENTS WITH CONCENTRATIONS OF CREDIT RISK

Not Applicable

NOTE 17 - SALE, TRANSFER AND SERVICING OF FINANCIAL ASSETS AND EXTINGUISHMENTS OF LIABILITIES

A. Transfers of Receivables Reported as Sales

Not Applicable

B. Transfer and Servicing of Financial Assets

Not Applicable

C. Wash Sales

Not Applicable

NOTE 18 – GAIN OR LOSS TO THE REPORTING ENTITY FROM UNINSURED PLANS AND THE PORTION OF PARTIALLY INSURED PLANS

Not Applicable

NOTE 19 – DIRECT PREMIUM WRITTEN/PRODUCED BY MANAGING GENERAL AGENTS/THIRD PARTY ADMINISTRATORS

Not Applicable

NOTE 20 - FAIR VALUE MEASUREMENTS

- Imputs Used for Assets and Liabilities Measured at Fair Value
 - (1) Items Measured and Reported at Fair Value by Levels 1, 2 and 3

The Company has categorized its assets and liabilities that are measured at fair value into the three-level fair value hierarchy as reflected in the table below. The three-level fair value hierarchy is based on the degree of subjectivity inherent in the valuation method by which fair value was determined. The three levels are defined as follows:

Level 1 – Quoted Prices in Active Markets for Identical Assets and Liabilities: This category, for items measured at fair value on a recurring basis, includes exchange-traded common stocks. The estimated fair value of the equity securities and derivatives within this category are based on quoted prices in active markets and are thus classified as Level 1.

Level 2 – Significant Other Observable Inputs: This category, for items measured at fair value on a recurring basis, includes bonds. The estimated fair value of some of these items were determined by independent pricing services using observable inputs. Others were based on quotes from markets which were not actively traded..

Level 3 – Significant Unobservable Inputs: The Company has no assets or liabilities measured at fair value in this category.

				Net Asset Value	
Description for Each Type of Asset or Liability	Level 1	Level 2	Level 3	(NAV)	Total
Assets at Fair Value					
Bonds	\$	\$	\$	\$	\$
Common Stocks - Industrial and Miscellaneous	\$ 41,967,247	\$	\$	\$	\$ 41,967,247
Common Stocks - Mutual Funds	\$ 1,271,139	\$	\$	\$	\$ 1,271,139
Total	\$ 43,238,386	\$	\$	\$	\$ 43,238,386
Liabilities at Fair Value					
None	\$	\$	\$	\$	\$
Total	\$	\$	\$	\$	\$

(2) Fair Value Measurements in (Level 3) of the Fair Value Hierarchy

				Total Gains and	Total Gains and					
	Beginning			(Losses)	(Losses)					
	Balance at	Transfers Into	Transfers Out	Included in Net	Included in				Settle-	Ending Balance
Description	1/1/2018	Level 3	of Level 3	Income	Surplus	Purchases	Issuances	Sales	ments	at 12/31/2018
a. Assets										
None	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$
Total	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$
 b. Liabilities 										
None	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$
Total	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$

(3) Policies on Transfers Into and Out of Level 3

At the end of each reporting period, the Company evaluates whether or not any event has occurred or circumstances have changed that would cause an instrument to be transferred into or out of Level 3. During the current year, no transfers into or out of Level 3 were required.

(4) Inputs and Techniques Used for Level 2 and Level 3 Fair Values

The Company has no assets or liabilities measured at fair value in the Level 2 or 3 categories.

(5) Derivative Fair Value

Not Applicable

B. Other Fair Value Disclosures

Not Applicable

C. Fair Value Level for All Financial Instruments by Level 1, 2 and 3

The tables below reflect the fair values and admitted assets and liabilities that are financial instruments, excluding those accounted for under the equity method (subsidiaries, joint ventures and ventures). The fair values are also categorized into the three-level fair value hierarchy as described above in Note 20A.

Type of Financial Instrument	Aggregate Fair					Net Asset Value	Not Practicable
as of 12/31/18	Value	Admitted Assets	(Level 1)	(Level 2)	(Level 3)	(NAV)	(Carrying Value)
Bonds	\$ 234,178,756	\$ 231,629,582	\$ 66,347,748	\$ 167,831,008	\$	\$	\$
Common Stock	\$ 43,238,386	\$ 43,238,386	\$ 43,238,386	\$	\$	\$	\$
Cash, cash equivalents and							
short-term investments	\$ 15,042,245	\$ 15,042,245	\$ 15,042,245	\$	\$	\$	\$

Type of Financial Instrument	Aggregate Fair					Net Asset Value	Not Practicable
as of 12/31/17	Value	Admitted Assets	(Level 1)	(Level 2)	(Level 3)	(NAV)	(Carrying Value)
Bonds	\$ 218,866,373	\$ 213,272,598	\$ 60,465,151	\$ 158,401,222	\$	\$	\$
Common Stock	\$ 51,031,542	\$ 51,031,542	\$ 51,031,542	\$	\$	\$	\$
Cash, cash equivalents and							
short-term investments	\$ 26,348,495	\$ 26,348,495	\$ 26,348,495	\$	\$	\$	\$

D. Not Practicable to Estimate Fair Value

		Effective Interest		
Type of Class or Financial Instrument	Carrying Value	Rate	Maturity Date	Explanation
None	\$ %			

E. NAV Practical Expedient Investments

Not Applicable

NOTE 21 - OTHER ITEMS

A. Unusual or Infrequent Items
 Not Applicable

B. Troubled Debt Restructuring Debtors

Not Applicable

C. Other Disclosures

Not Applicable

D. Business Interruption Insurance Recoveries

Not Applicable

E. State Transferable and Non-Transferable Tax Credits

Not Applicable

- F. Subprime Mortgage Related Risk Exposure
 - (1) Subprime Mortgage Exposures

The Company invests in several asset classes that could be adversely impacted by subprime mortgage exposure including mortgage-backed securities and equity investments in financial institutions. In addition, all investment classes are impacted by market exposure to adverse news in the economy. Conservative investment guidelines limit the Company's exposure to such losses.

(2) Direct Exposure Through Investments in Subprime Mortgage Loans

Not Applicable

(3) Direct Exposure Through Other Investments

The Company invests in several other asset classes that could have subprime mortgage exposure including:

- Residential mortgage-backed securities
- Structured loan-backed securities
- Debt obligations and equity securities of unaffiliated financial institutions participating in subprime lending practices

The Company has reviewed its investments in debt obligations to determine that they are investment grade quality, are current for interest payments due, and, in the case of mortgage-backed securities, that such investments are in tranches that have minimal default risk. Default risk on bonds appears to be minimal at present; however, the credit crisis could worsen in the future, negatively impacting the status of obligations held. In the case of equity securities, market values that are less than the cost of securities have been deducted from surplus to the extent such differences do not reflect other-than-temporary declines in market value.

There is no subprime residential mortgage exposure as of the end of the current year.

(4) Underwriting Exposure to Subprime Mortgage Risk Through Mortgage Guaranty or Financial Guaranty Insurance Coverage

Not Applicable

G. Insurance-Linked Securities (ILS) Contracts

Not Applicable

NOTE 22 - EVENTS SUBSEQUENT

Subsequent events have been considered through February 28, 2019, the date of issuance of these statutory financial statements. There were no events occurring subsequent to the end of the current year that merited disclosure in these statements.

The Company is not subject to an annual ACA assessment under section 9010 of the Affordable Care Act since it does not write health insurance.

NOTE 23 - REINSURANCE

A. Unsecured Reinsurance Recoverables

The Company does not have any unsecured aggregate reinsurance recoverables for paid and unpaid losses, loss adjustment expenses and unearned premiums for individual reinsurers authorized, unauthorized or certified, that exceed 3% of policyholders' surplus.

B. Reinsurance Recoverable in Dispute

	Total Amount in			
	Dispute (Including			
Name of Reinsurer	IBNR)	Notification	Arbitration	Litigation
NONE	\$	\$	\$	\$

- C. Reinsurance Assumed and Ceded
 - (1) The following table summarizes assumed and ceded unearned premiums and the related commission equity at the end of the current year:

Premium Reserve Commission Equity Premium Reserve Commission Equity Premium	Reserve Commission Equity
a. Affiliates \$ 7,977 \$ \$ \$	7,977 \$
b. All Other 6,155,696 (6,	,155,696)
c. Total \$ 7,977 \$ \$ 6,155,696 \$ \$ (6,	,147,719) \$

d. Direct Unearned Premium Reserves \$ 24,361,690

- (2) The Company does not have any reinsurance contracts that provide for additional or return commissions based on the actual loss experience of the reinsurance contracts.
- (3) The Company does not use protected cells as an alternative to traditional reinsurance.
- D. Uncollectible Reinsurance

Not Applicable

E. Commutation of Ceded Reinsurance

Not Applicable

F. Retroactive Reinsurance

Not Applicable

G. Reinsurance Accounted for as a Deposit

Not Applicable

H. Disclosures for the Transfer of Property and Casualty Run-off Agreements

Not Applicable

- Certified Reinsurer Rating Downgraded or Status Subject to Revocation Not Applicable
- J. Reinsurance Agreements Qualifying for Reinsurer Aggregation
 Not Applicable

NOTE 24 - RETROSPECTIVELY RATED CONTRACTS AND CONTRACTS SUBJECT TO REDETERMINATION

Not Applicable

NOTE 25 - CHANGE IN INCURRED LOSSES AND LOSS ADJUSTMENT EXPENSES (000's omitted)

Current year changes in estimates of the costs of prior year losses and loss adjustment expenses (LAE) affect the current year Statement of Income. Increases in those estimates increase current year expense and are referred to as unfavorable development or prior year reserve shortages. Decreases in those estimates decrease current year expense and are referred to as favorable development or prior year reserve redundancies. Current year losses and LAE reflected on the Statement of Income of \$25,761 were lower by \$3,936 due to favorable development of prior year estimates. This favorable development was approximately 4.3% of the prior year reserves for unpaid losses and LAE reflected on the Balance Sheet of \$92,085.

The first two columns in the table below reflect by line of business the expense on the Statement of Income and what that expense would have been without prior year development (from Schedule P – Part 1). The third column is the difference between the first two columns and reflects the favorable development of \$3,936. The decrease was primarily due to improved experience in the 2010 through 2016 report years. Increases or decreases of this nature occur as a result of claim settlements and receipt and evaluation of additional information regarding unpaid claims. Recent development trends are also taken into account in evaluating the overall adequacy of reserves.

The last two columns reconcile the redundancy shown in the third column to the information shown in Schedule P – Part 2, which includes losses and the defense and cost containment (DCC) portion of LAE, but excludes the adjusting and other (AO) portion of LAE.

(000's omitted)	Current Calendar	Current Loss Year Losses and LAE Incurred		Loss and DCC Shortage	Impact of AO on
Schedule P	Year Losses and	Schedule P - Part 1	Total Shortage	(Redundancy)	Total Shortage
Lines of Business	LAE Incurred		(Redundancy)	Schedule P - Part 2	(Redundancy)
MPL - Occurrence	\$ 956	\$ 1,166	\$ (210)	\$ (281)	\$ 71
MPL - Claims Made	23,008	27,029	(4,021)	(1,792)	(2,229)
Other Liability - Occurrence	320	285	35	(117)	152
Other Liability - Claims Made	1,477	1,217	260	(173)	433
Total	\$ 25,761	\$ 29,697	\$ (3,936)	\$ (2,363)	\$ (1,573)

NOTE 26 - INTERCOMPANY POOLING ARRANGEMENTS

Not Applicable

NOTE 27 – STRUCTURED SETTLEMENTS

A. Reserves Released Due to Purchase of Annuities

The Company purchased annuities from life insurers under which the claimants are payees (see Note 14G). The Company has no contingent liability should the issuers of these annuities fail to perform under the terms of the annuities.

B. Annuity Insurers with Balances Due Greater than 1% of Policyholders' Surplus
 Not Applicable

NOTE 28 - HEALTH CARE RECEIVABLES

Not Applicable

NOTE 29 - PARTICIPATING POLICIES

Not Applicable

NOTE 30 – PREMIUM DEFICIENCY RESERVES

1. Liability carried for premium deficiency reserve: None

Date of most recent evaluation of this liability: October 31, 2018

3. Was anticipated investment income utilized in the calculation? Yes

NOTE 31 - HIGH DEDUCTIBLES

- Reserve Credit Recorded on Unpaid Claims and Amount Billed and Recoverable on Paid Claims for High Deductibles
 - (1) Counterparty Exposure Recorded on Unpaid Claims and Billed Recoverables on Paid Claims

1 Annual Statement Line of Business	2 Gross (of High Deductible) Loss Reserves	3 leserve Credit for High Deductibles	4 Billed Recoverables on Paid Claims	Tot	5 al High Deductibles and Billed Recoverables (Col 3 + Col 4)
11.1 Medical Professional Liability - Occurrence	\$	\$ <u> </u>	\$	\$	
11.2 Medical Professional Liability - Claims Made	\$ 17,486,720	\$ 11,786,137	\$	\$	11,786,137
17.1 Other Liability - Occurrence	\$ 359,931	\$ 343,129	\$	\$	343,129
17.2 Other Liability - Claims Made	\$ 133,777	\$	\$	\$	
_		·			
Total	\$ 17,980,428	\$ 12,129,266	\$	\$	12,129,266

(2)	Unsecured Amounts of High Deductibles		
	a. Total high deductibles and billed recoverables on paid claimsb. Collateral on balance sheetc. Collateral off balance sheet	\$ \$ \$	12,129,266 50,000
	 d. Total unsecured deductibles and billed recoverables on paid claims e. Percentage unsecured 	\$	12,079,266 99.6%
(3)	High Deductible Recoverable Amounts on Paid Claims		
	 a. Amount of overdue nonadmitted (either due to aging or collateral) b. Total over 90 days overdue admitted c. Total overdue (a + b) 	\$ \$ \$	0 0 0

(4) The Deductible Amounts for the Highest Ten Unsecured High Deductible Policies

	Top Ten Unsecured High
Counterparty Ranking	Deductible Amounts
Counterparty 1	\$ 8,926,981
Counterparty 2	\$ 3,152,285
Counterparty 3	\$
Counterparty 4	\$
Counterparty 5	\$
Counterparty 6	\$
Counterparty 7	\$
Counterparty 8	\$
Counterparty 9	\$
Counterparty 10	\$

- Unsecured High Deductible Recoverables for Individual Obligors Part of a Group under the Same Management or Control which are Greater than 1% of Capital and Surplus. For this purpose, a group of entities under common control shall be regarded as a single customer.
 - (1) Total Group Unsecured Aggregate Recoverable

	Total Unsecured
	Aggregate
Group Name	Recoverable
None	\$

(2) Obligors and Related Members in the Group

Group Name	Obligors and Related Group Members
None	

NOTE 32 - DISCOUNTING OF LIABILITIES FOR UNPAID LOSSES OR UNPAID LOSS ADJUSTMENT EXPENSES

The Company does not discount liabilities for unpaid losses or loss adjustment expenses.

NOTE 33 - ASBESTOS/ENVIRONMENTAL RESERVES

The Company is not exposed to asbestos and/or environmental claims.

NOTE 34 - SUBSCRIBER SAVINGS ACCOUNTS

Not Applicable

NOTE 35 - MULTIPLE PERIL CROP INSURANCE

Not Applicable

NOTE 36 - FINANCIAL GUARANTY INSURANCE

Not Applicable

PART 1 - COMMON INTERROGATORIES

GENERAL

1.1		orting entity a member of an Insurance Holding Company System consisting of two mplete Schedule Y, Parts 1, 1A and 2.	o or more aff	iliated persons, one or more of which is an insurer	?	Yes [X] No []
1.2	If yes, did official of similar to System R	I the reporting entity register and file with its domiciliary State Insurance Commission the state of domicile of the principal insurer in the Holding Company System, a register standards adopted by the National Association of Insurance Commissioners (National Association of Insurance Commissioners) (National Actional Association of Insurance Commissioners) ally similar to those required by such Act and regulations?	istration stat NAIC) in its N	ement providing disclosure substantially flodel Insurance Holding Company	Yes[X]	No[]	N/A []
1.3	State reg	ulating? <u>MAINE</u>					
1.4	Is the rep	orting entity publicly traded or a member of publicly traded group?				Yes[]	No [X]
1.5	If the resp	conse to 1.4 is yes, provide the CIK (Central Index Key) code issued by the SEC fo	r the entity/g	roup.			
2.1	Has any or reporting	change been made during the year of this statement in the charter, by-laws, articles entity?	s of incorpor	ation, or deed of settlement of the		Yes[]	No [X]
2.2	If yes, dat	te of change:					
3.1	State as	of what date the latest financial examination of the reporting entity was made or is t	peing made.			12/31/20)16
3.2		as of date that the latest financial examination report became available from either should be the date of the examined balance sheet and not the date the report was				12/31/20)16
3.3		of what date the latest financial examination report became available to other states ting entity. This is the release date or completion date of the examination report an				07/23/20)18
3.4		department or departments? PUREAU OF INSURANCE					
3.5	Have all f	inancial statement adjustments within the latest financial examination report been	accounted fo	or in a subsequent financial	Voo I 1	No.1.1	N/A [V 1
2.0		t filed with departments?	J;tFO		Yes[]	No[]	N/A [X]
3.6		of the recommendations within the latest financial examination report been complie			Yes[]	No []	N/A [X]
4.1	thereof ur	e period covered by this statement, did any agent, broker, sales representative, no nder common control (other than salaried employees of the reporting entity) receive an 20 percent of any major line of business measured on direct premiums) of:					
	4.11	sales of new business?				Yes[]	No [X]
	4.12	renewals?				Yes[]	No [X]
4.2		e period covered by this statement, did any sales/service organization owned in wheredit or commissions for or control a substantial part (more than 20 percent of any re-					
	4.21	sales of new business?	.,.	· · · · · · · · · · · · · · · · · · ·		Yes[]	No [X]
	4.22	renewals?				Yes[]	No [X]
5.1	Has the re	eporting entity been a party to a merger or consolidation during the period covered	by this state	ement?		Yes[]	No [X]
		wer is YES, complete and file the merger history data file with the NAIC.	•				
5.2		ovide the name of entity, NAIC company code, and state of domicile (use two letter he merger or consolidation.	state abbrev	viation) for any entity that has ceased to exist as a			
		1				2	3
						AIC npany	State of
		Name of Entity				ode	Domicile
6.1	by any go	eporting entity had any Certificates of Authority, licenses or registrations (including overnmental entity during the reporting period? refull information:	corporate re	gistration, if applicable) suspended or revoked		Yes[]	No [X]
7.1		r foreign (non-United States) person or entity directly or indirectly control 10% or mo	ore of the rep	porting entity?		Yes[]	No [X]
7.2	If yes,						21
	7.21	State the percentage of foreign control					%
	7.22	State the nationality(s) of the foreign person(s) or entity(s); or if the entity is a mut attorney-in-fact and identify the type of entity(s) (e.g., individual, corporation, gove					
		1		2			
		Nationality		Type of Entity			
8.1 8.2		inpany a subsidiary of a bank holding company regulated with the Federal Reserve se to 8.1 is yes, please identify the name of the bank holding company.	Board?			Yes[]	No [X]
		Assistant and a second a second and a second a second and					
8.3	Is the con	npany affiliated with one or more banks, thrifts or securities firms?				Yes[]	No [X]
8.4		ponse to 8.3 is yes, please provide below the names and locations (city and state o			al		
		y services agency [i.e. the Federal Reserve Board (FRB), the Office of the Comptro on (FDIC) and the Securities Exchange Commission (SEC)] and identify the affiliat					
	T T T T T T T T T T T T T T T T T T T	1	primary i	2 3	4	5	6
		Affiliate Name		Location (City, State) FR			-
9.					l		
J.		ne name and address of the independent certified public accountant or accounting NEWMAN & NOYES, LLC 280 FORE STREET PORTLAND, ME 04101	firm retained	I to conduct the annual audit?			
	BAKER	NEWMAN & NOYES, LLC 280 FORE STREET PORTLAND, ME 04101					
10.1	BAKER Has the in		by the certifi	ed independent public accountant requirements		Yes[]	No [X]
	BAKER Has the ir as allowe	NEWMAN & NOYES, LLC 280 FORE STREET PORTLAND, ME 04101 nsurer been granted any exemptions to the prohibited non-audit services provided	by the certifi	ed independent public accountant requirements		Yes[]	No [X]
10.1	BAKER Has the ir as allowe If the resp	NEWMAN & NOYES, LLC 280 FORE STREET PORTLAND, ME 04101 Insurer been granted any exemptions to the prohibited non-audit services provided in Section 7H of the Annual Financial Reporting Model Regulation (Model Audit Loonse to 10.1 is yes, provide information related to this exemption: Insurer been granted any exemptions related to other requirements of the Annual F	by the certifi Rule), or sub	ed independent public accountant requirements stantially similar state law or regulation?			
10.1 10.2 10.3	BAKER Has the ir as allowe If the resp Has the ir for in Sec	NEWMAN & NOYES, LLC 280 FORE STREET PORTLAND, ME 04101 Insurer been granted any exemptions to the prohibited non-audit services provided in Section 7H of the Annual Financial Reporting Model Regulation (Model Audit Loonse to 10.1 is yes, provide information related to this exemption: Insurer been granted any exemptions related to other requirements of the Annual Foundation 18A of the Model Regulation, or substantially similar state law or regulation?	by the certifi Rule), or sub	ed independent public accountant requirements stantially similar state law or regulation?		Yes[]	
10.1	BAKER Has the ir as allowe If the resp Has the ir for in Sec	NEWMAN & NOYES, LLC 280 FORE STREET PORTLAND, ME 04101 Insurer been granted any exemptions to the prohibited non-audit services provided in Section 7H of the Annual Financial Reporting Model Regulation (Model Audit Loonse to 10.1 is yes, provide information related to this exemption: Insurer been granted any exemptions related to other requirements of the Annual F	by the certifi Rule), or sub	ed independent public accountant requirements stantially similar state law or regulation?			

PART 1 - COMMON INTERROGATORIES

10.6	If the response to 10.5 is no or n/a, please	explain:				
11.	of the individual providing the statement of	officer/employee of the reporting entity or actuary/conf actuarial opinion/certification? LTING ACTUARY MILLIMAN, INC. BROOKFIELD,				
12.1	Does the reporting entity own any securities	es of a real estate holding company or otherwise hold	real estate indirectly?		Yes[]	No [X]
	12.11 Name of real estate holding co	mpany				
	12.12 Number of parcels involved			_		0
10.0	12.13 Total book/adjusted carrying va	alue		\$		0
12.2	If yes, provide explanation					
13. 13.1	FOR UNITED STATES BRANCHES OF A What changes have been made during the	ALIEN REPORTING ENTITIES ONLY: e year in the United States manager or the United States	ates trustees of the reporting entity?			
13.2	Does this statement contain all business tr	ransacted for the reporting entity through its United S	tates Branch on risks wherever located?		Yes[]	No [
13.3	Have there been any changes made to any of the trust indentures during the year?					No []
13.4	If answer to (13.3) is yes, has the domicilia	, , , ,		Yes[]	No []	N/A [
14.1		officer, principal financial officer, principal accounting a code of ethics, which includes the following standard			Yes[X]	No [
	, , ,	•	its of interest between personal and professional relationshi	DS:	ies[X]	NO [
		derstandable disclosure in the periodic reports requir	·	,		
	(c) Compliance with applicable gove	ernmental laws, rules and regulations;				
	(d) The prompt internal reporting of	violations to an appropriate person or persons identif	ed in the code; and			
	(e) Accountability for adherence to the					
14.11	If the response to 14.1 is no, please explain	in:				
14.2	Has the code of ethics for senior manager	s been amended?			Yes [X]	No [
14.21	If the response to 14.2 is yes, provide info					
	Code of ethics policy was rewritten.					
14.3	* '	been waived for any of the specified officers?			Yes []	No [X]
14.31	If the response to 14.3 is yes, provide the	nature of any waiver(s).				
15.1	Is the reporting entity the beneficiary of a L Bank List?	Letter of Credit that is unrelated to reinsurance where	the issuing or confirming bank is not on the SVO		Yes[X]	No [
15.2		American Bankers Association (ABA) Routing Numb	er and the name of the issuing or confirming bank of			
		mstances in which the Letter of Credit is triggered.	2			
	1 American Bankers Association (ABA)	2	3 Circumstances That Can Trigger		4	
	Routing Number	Issuing or Confirming Bank Name	the Letter of Credit		Amount	
	211274502	Kennebunk Savings Bank	Unreimbursed deductible	\$	2	50,000
		BOARD OF DIRE	CTORS			
16.	Is the purchase or sale of all investments of	of the reporting entity passed upon either by the Boar	d of Directors or a subordinator committee thereof?		Yes [X]	No []
17.	Does the reporting entity keep a complete	permanent record of the proceedings of its Board of	Directors and all subordinate committees thereof?		Yes [X]	No []
18.		ocedure for disclosure to its Board of Directors or trus responsible employees that is in conflict or is likely to			Yes [X]	No [
		FINANCIA	L			
19.	Has this statement been prepared using a	basis of accounting other than Statutory Accounting	Principles (e.g., Generally Accepted Accounting Principles)?	?	Yes[]	No [X]
20.1	Total amount loaned during the year (inclu	usive of Separate Accounts, exclusive of policy loans)	:			
	20.11 To directors or other officers			\$		0
	20.12 To stockholders not officers			\$		0
	20.13 Trustees, supreme or grand (F	••		\$		0
20.2	•	end of year (inclusive of Separate Accounts, exclusive	e of policy loans):	¢		0
	20.21 To directors or other officers 20.22 To stockholders not officers			φ		0
	20.23 Trustees, supreme or grand (F	raternal only)				0
21.1	, ,	it subject to a contractual obligation to transfer to and	ther party without the liability for such obligation			
	being reporting in the statement?				Yes[]	No [X]
21.2	If yes, state the amount thereof at Decemb	per 31 of the current year:				
	21.21 Rented from others			\$		0
	21.22 Borrowed from others			\$		0
	21.23 Leased from others			\$		0
22.4	21.24 Other	accompanies as described in the Annual Class and	notructions other than success find s	\$		0
22.1	Does this statement include payments for guaranty association assessments?	assessments as described in the Annual Statement	nsuucuons omei man guaranty tund or		Yes[]	No [X]
22.2	If answer is yes:					
	22.21 Amount paid as losses or risk a	adjustment		\$		0
	22.22 Amount paid as expenses			\$		0
	22.23 Other amounts paid			\$		0
23.1	Does the reporting entity report any amou	nts due from parent, subsidiaries or affiliates on Page	2 of this statement?		Yes[X]	No [
23.2	If you indicate any amounta receivable fro	om parent included in the Page 2 amount		¢		0

24.01 Were all the stocks, bonds and other securities owned December 31 of current year, over which the reporting entity has exclusive control,

PART 1 - COMMON INTERROGATORIES

INVESTMENT

	in the ac	tual possession of the reporting entity on said date (o	ther than se	ecurities lending programs address	ed in 24.03)?			Yes [X]	No []
24.02	If no, giv	e full and complete information, relating thereto:							
24.03	collatera The Cor	rity lending programs, provide a description of the pro l is carried on or off-balance sheet (an alternative is to npany does not participate in securities lending progra	reference ams.	Note 17 where this information is a	also provided).				
24.04		e company's security lending program meet the require		•, •	in the Risk-Based	Capital Instructions?	Yes[]	No []	N/A [X]
24.05		er to 24.04 is yes, report amount of collateral for confo	0. 0	rams.			\$		0
24.06		er to 24.04 is no, report amount of collateral for other					\$		0
24.07	Does yo of the co	ur securities lending program require 102% (domestic	securities)	and 105% (foreign securities) from	n the counterparty	at the outset	Vac I 1	No 1	NI/A [V 1
24.08		rruser: reporting entity non-admit when the collateral receiv	ed from the	counterparty falls below 100%2			Yes[] Yes[]	No [] No []	N/A [X] N/A [X]
24.09.		e reporting entity or the reporting entity's securities ler		, ,	na Aareement (MS	SLA) to	103[]	NO[]	IVA[A]
		securities lending?		a20 (1.0 1.100to) 000011(00 2011011	.g / .g. coc (Yes[]	No []	N/A [X]
24.10	For the r	eporting entity's security lending program, state the a	mount of th	e following as of December 31 of the	he current year:				
	24.101	Total fair value of reinvested collateral assets reported	d on Sched	ule DL, Parts 1 and 2:			\$		0
		Total book adjusted/carrying value of reinvested colla			and 2:		\$		0
		Total payable for securities lending reported on the li	,, ,				\$		0
25.1	of the re securitie	y of the stocks, bonds or other assets of the reporting porting entity or has the reporting entity sold or transfe s subject to Interrogatory 21.1 and 24.03.)	erred any a					Yes[X]	No []
25.2	•	ate the amount thereof at December 31 of the current	year:						_
	25.21	Subject to repurchase agreements					\$		0
	25.22	Subject to reverse repurchase agreements					\$		0
	25.23	Subject to dollar repurchase agreements					\$		0
	25.24	Subject to reverse dollar repurchase agreements					\$		0
	25.25	Placed under option agreements	=:	W 100 1			\$		0
	25.26	Letter stock or securities restricted as sale – excluding	ng FHLB Ca	apital Stock			\$		0
	25.27	FHLB Capital Stock					\$	4	0
	25.28	On deposit with states					\$	1:	98,482
	25.29	On deposit with other regulatory bodies	4a an EUU E				\$		0
	25.30 Pledged as collateral – excluding collateral pledged to an FHLB						\$		0
	25.31	Pledged as collateral to FHLB – including assets ba	cking tundir	ig agreements			\$		0
25.3	25.32	Other					\$		0
25.3	For cate	gory (25.26) provide the following:			2			3	
		Nature of Restriction		Des	cription			Amoun	
							\$		
26.1 26.2	If yes, ha	e reporting entity have any hedging transactions reports as a comprehensive description of the hedging progra ach a description with this statement.			e?		Yes[]	Yes[] No[]	No [X] N/A [X]
27.1 27.2	convertib	y preferred stocks or bonds owned as of December 3 ole into equity? ate the amount thereof at December 31 of the curren		rent year mandatorily convertible in	nto equity, or, at th	e option of the issuer,	\$	Yes[]	No [X]
28.	, ,	g items in Schedule E-Part 3-Special Deposits, real e	,	gage loans and investments held n	hvsically in the ren	orting entity's	Ψ		
20.	offices, v custodia	aults or safety deposit boxes, were all stocks, bonds agreement with a qualified bank or trust company in Il Functions, Custodial or Safekeeping Agreements of For agreements that comply with the requirements of	and other s accordance the NAIC I	ecurities, owned throughout the cu with Section 1, III - General Exam Financial Condition Examiners Han	rrent year held pur nination Considera ndbook?	rsuant to a tions, F. Outsourcing		Yes [X]	No []
	20.01	1			.a.zoon, complete	2			
		Name of Cust	todian(s)			Custodian's	Address		
		BROWN BROTHERS HARRIMAN & CO.			140 BROADWAY	Y NEW YORK, NY 100	005-1101		
	28.02	For all agreements that do not comply with the requi location and a complete explanation	rements of	he NAIC Financial Condition Exan 2	niners Handbook,	provide the name,			
		Name(s) Location(s) Complete Explan							
	28.03 28.04						Yes[]	No [X]	
		1 Old Controller		2 Nov. Contadion		3	_	4	
		Old Custodian		New Custodian		Date of Change	Ke	ason	
	28.05	Investment management – Identify all investment ad to make investment decisions on behalf of the report note as such. ["that have access to the investment	ing entity.	For assets that are managed intern					
				1				2]
		DDOWN DDOTHEDS HADDING A SO	Name of	Firm or Individual				iation	
		BROWN BROTHERS HARRIMAN & CO.						U	

PART 1 - COMMON INTERROGATORIES

28.0597 For those firms/individuals listed in the table for Question 28.05, do any firms/individuals unaffiliated with the reporting entity (i.e. designated with a "U") manage more than 10% of the reporting entity's assets?

Yes[X] No[]

28.0598 For firms/individuals unaffiliated with the reporting entity (i.e. designated with a "U") listed in the table for Question 28.05, does the total assets under management aggregate to more than 50% of the reporting entity's assets?

Yes[X] No[]

For those firms or individuals listed in the table for 28.05 with an affiliation code of "A" (affiliated) or "U" (unaffiliated), provide the information 28.06 for the table below.

1	2	3	4	5
			Registered	Investment Management Agreement
Central Registration Depository Number	Name of Firm or Individual	Legal Entity Identifier (LEI)	With	(IMA) Filed
104487	BROWN BROTHERS HARRIMAN & CO.		NOT REGISTER	NO

Does the reporting entity have any diversified mutual funds reported in Schedule D-Part 2 (diversified according to the Securities and 29 1 Exchange Commission (SEC) in the Investment Company Act of 1940 [Section 5 (b) (1)])?

Yes[X] No[]

If ves. complete the following schedule:

1 CUSIP			2 Name of Mutual Fund		3 Book/Adjusted Carrying Value		
316071	10	9	FIDELITY CONTRAFUND	!	\$	178,999	
316389	30	3	FIDELITY BLUE CHIP GROWTH	!	\$	6,139	
316389	40	9	FIDELITY DIVIDEND GROWTH	!	\$	13,686	
29.2999 T	OTAL			:	\$	198,824	

For each mutual fund listed in the table above, complete the following schedule: 29.3

For each mutual lund listed in the table above, complete	the following schedule.			
1 Name of Mutual Fund (from above table)	2 Name of Significant Holding of the Mutual Fund	Book/Ad Value At	3 of Mutual Fund's jjusted Carrying tributable to the Holding	4 Date of Valuation
FIDELITY CONTRAFUND	AMAZON.COM, INC.	\$	11,993	12/31/2018
FIDELITY CONTRAFUND	BERKSHIRE HATHAWAY, INC. CLASS A	\$	10,382	12/31/2018
FIDELITY CONTRAFUND	FACEBOOK, INC. CLASS A	\$	9,845	12/31/2018
FIDELITY CONTRAFUND	MICROSOFT CORP.	\$	7,697	12/31/2018
FIDELITY CONTRAFUND	UNITEDHEALTH GROUP, INC.	\$	6,802	12/31/2018
FIDELITY BLUE CHIP GROWTH	AMAZON.COM, INC.	\$	460	12/31/2018
FIDELITY BLUE CHIP GROWTH	ALPHABET, INC. CLASS A	\$	448	12/31/2018
FIDELITY BLUE CHIP GROWTH	APPLE, INC.	\$	387	12/31/2018
FIDELITY BLUE CHIP GROWTH	MICROSOFT CORP.	\$	282	12/31/2018
FIDELITY BLUE CHIP GROWTH	FACEBOOK, INC. CLASS A	\$	203	12/31/2018
FIDELITY DIVIDEND GROWTH	BERKSHIRE HATHAWAY, INC. CLASS B	\$	1,314	12/31/2018
FIDELITY DIVIDEND GROWTH	COMCAST CORP. CLASS A	\$	821	12/31/2018
FIDELITY DIVIDEND GROWTH	GENERAL ELECTRIC CO.	\$	575	12/31/2018
FIDELITY DIVIDEND GROWTH	EXXON MOBIL CORP.	\$	506	12/31/2018
FIDELITY DIVIDEND GROWTH	APPLE, INC.	\$	506	12/31/2018

Provide the following information for all short-term and long-term bonds and all preferred stocks. Do not substitute amortized value or statement value for fair value. 30

		1		2		3
					Excess of Statement over Value (-), or Fair Value	
		Statement (Admitted) Value Fair Value			Statement (+)	
30.1	Bonds	\$ 238,322,834	\$	240,872,008	\$	2,549,174
30.2	Preferred Stocks	\$ 0	\$	0	\$	0
30.3	Totals	\$ 238,322,834	\$	240,872,008	\$	2,549,174

304 Describe the sources or methods utilized in determining the fair values:

SVO prices were used to determine the fair value for securities if the prices were available within time contraints. For those bonds that didn't have SVO prices,

fair values were obtained from Brown Brothers Harriman & Co. who serves as both investment advisor and custodian. 31.1 Was the rate used to calculate fair value determined by a broker or custodian for any of the securities in Schedule D?

Yes[X] No[]

If the answer to 31.1 is yes, does the reporting entity have a copy of the broker's or custodian's pricing policy (hard copy or electronic 31.2 copy) for all brokers or custodians used as a pricing source?

Yes[X] No[]

- 31.3 If the answer to 31.2 is no, describe the reporting entity's process for determining a reliable pricing source for purposes of disclosure of fair value for Schedule D:
- 32.1 Have all the filing requirements of the Purposes and Procedures Manual of the NAIC Investment Analysis Office been followed?

Yes[X] No[]

Yes[] No[X]

- 32.2 If no, list exceptions:
- 33. By self-designating 5GI securities, the reporting entity is certifying the following elements for each self-designation 5GI security:
 - Documentation necessary to permit a full credit analysis of the security does not exist or an NAIC CRP credit rating for an FE or PL security is not
 - h Issuer or obligor is current on all contracted interest and principal payments.
 - The insurer has an actual expectation of ultimate payment of all contracted interest and principal.

Has the reporting entity self-designated 5GI securities?

- 34 By self-designating PLGI securities, the reporting entity is certifying the following elements of each self-designated PLGI security:
 - The security was purchased prior to January 1, 2018.

PART 1 - COMMON INTERROGATORIES

- The reporting entity is holding capital commensurate with the NAIC Designation reported for the security. b.
- The NAIC Designation was derived from the credit rating assigned by an NAIC CRP in its legal capacity as an NRSRO which is shown on a current private letter rating held by the insurer and available for examination by state insurance regulators. C.
- d. The reporting entity is not permitted to share this credit rating of the PL security with the SVO.

Has the reporting entity self-designated PLGI securities?

Yes[] No[X]

^-	ГL		. D
U	ΙГ	16	:К

35.1	Amount of payments to trade associations, service organizations and statistical or rating bureaus, if any?	\$ 155,781
35.2	List the name of the organization and the amount paid if any such payment represented 25% or more of the total payments to	

trade associations, service organizations and statistical or rating bureaus during the period covered by this statement.

	2
Name	Amount Paid
Insurance Services Office, Inc.	\$ 96,825

36.1 Amount of payments for legal expenses, if any? 126,569

36.2 List the name of the firm and the amount paid if any such payment represented 25% or more of the total payments for legal expenses during the period covered by this statement.

1 Name	2 Amount Paid
Verrill Dana, LLP	\$ 65,404
Morrison Mahoney LLP	\$ 33,905

37 1 Amount of payments for expenditures in connection with matters before legislative bodies, officers or departments of government, if any? \$ 22.157 37.2

List the name of the firm and the amount paid if any such payment represented 25% or more of the total payment expenditures in connection with matters before legislative bodies, officers or departments of government during the period covered by this statement.

1 Name		2 Amount Paid
Soltan Bass, LLP	\$	16,347
Medical Professional Liability Association	\$	5,562

business.

Annual Statement for the year 2018 of the Medical Mutual Insurance Company of Maine

GENERAL INTERROGATORIES

PART 2 - PROPERTY & CASUALTY INTERROGATORIES

1.1	Does th	ne reporting entity have any direct Medicare Supplement Insurance in fo	orce?			Yes[]	No [X]
1.2	If yes, i	ndicate premium earned on U.S. business only.		<u>\$</u>	δ		0
1.3	What p	ortion of Item (1.2) is not reported on the Medicare Supplement Insurar	nce Experience Exhibit?	\$	ŝ		0
	1.31	Reason for excluding:		_			
		•					
1.4	Indicate	e amount of earned premium attributable to Canadian and/or Other Alie	en not included in Item (1.2) above	\$	6		0
1.5		e total incurred claims on all Medicare Supplement insurance.	511 Hot included in Roll (1.2) above.	\$			0
				<u>4</u>)		
1.6		ual policies:					
	Most c	urrent three years:					
	1.61	Total premium earned			\$		0
	1.62	Total incurred claims			\$		0
	1.63	Number of covered lives		•			0
	-	rs prior to most current three years:			•		•
	1.64	Total premium earned		,	\$		0
	1.65	Total incurred claims			\$		0
	1.66	Number of covered lives					0
1.7	Group	policies:		•			
•••		urrent three years:					
		•			r		^
	1.71	Total premium earned			<u>\$</u>		0
	1.72	Total incurred claims			\$		0
	1.73	Number of covered lives					0
	All year	rs prior to most current three years:					
	1.74	Total premium earned			\$		0
	1.75	Total incurred claims			φ		
							0
	1.76	Number of covered lives					0
2.	Health	Test:					
			1		2		
			Current Year	Prio	or Year		
	2.1	Premium Numerator	\$ 0	\$	0		
	2.2	Premium Denominator	\$ 35,743,714	\$	33,878,058		
	2.3	Premium Ratio (2.1/2.2)	0.0%	·	0.0	10/2	
				Φ.		770	
	2.4	Reserve Numerator	\$ 0	\$	0		
	2.5	Reserve Denominator	\$ 113,562,811	\$ 1	114,167,500		
	2.6	Reserve Ratio (2.4/2.5)	0.0%		0.0)%_	
3.1	Does th	ne reporting entity issue both participating and non-participating policies	s?			Yes[]	No[X]
3.2		state the amount of calendar year premiums written on:					
0.2	•	• •			\$		0
	3.21	Participating policies			<u>-</u>		
	3.22	Non-participating policies			\$		0
4.	FOR M	UTUAL REPORTING ENTITIES AND RECIPROCAL EXCHANGES O	DNLY:				
	4.1	Does the reporting entity issue assessable policies?				Yes[]	No [X]
	4.2	Does the reporting entity issue non-assessable policies?				Yes[X]	No[]
	4.3	If assessable policies are issued, what is the extent of the contingent	t liability of the policyholders?				%
	4.4	Total amount of assessments paid or ordered to be paid during the y	, , ,		\$		0
_		ECIPROCAL EXCHANGES ONLY:	to a continue of continue of promitting.		Ψ		
5.						.,	
	5.1	Does the exchange appoint local agents?				Yes[]	No []
	5.2	If yes, is the commission paid:					
		5.21 Out of Attorney's-in-fact compensation			Yes[]	No []	N/A []
		5.22 As a direct expense of the exchange			Yes[]	No []	N/A []
	5.3	What expenses of the exchange are not paid out of the compensatio	on of the Attorney-in-fact?				
			,				
	5.4	Has any Attorney-in-fact compensation, contingent on fulfillment of co	ertain conditions, been deferred?			Yes[]	No[]
	5.5	If yes, give full information:					
	0.0	, 500, g. 10 10					
6.1	What n	rovision has this reporting entity made to protect itself from an excessiv	ve loss in the event of a catastrophe under a workers' comper	nsation			
		t issued without limit of loss?					
	Not ap	<u> plicable - The Company does not issue workers' compensation policies</u>	<u>s.</u>				
6.2	Describ	be the method used to estimate this reporting entity's probable maximul	im insurance loss, and identify the type of insured exposures	comprising			
		obable maximum loss, the locations of concentrations of those exposure	es and the external resources (such as consulting firms or co	mputer			
		re models), if any, used in the estimation process:	ata aga a Baggaga a and ata ba a a ana a Madesta a a fancta.	.1.0.1.00			
		um loss exposure per claim is limited by reinsurance treaty loss rege in ME, MA, NH and VT comprise the most significant risk of loss					
	actuan	ge in ME, MA, NH and VT comprise the most significant risk of loss v. Milliman, Inc.	o. Orumate 1000es are estimated in cooperation with the CC	Jilipaily 5			
6.3	-		ce program) to protect itself from an excessive less erising for	om the tunes			
U.J		rovision has this reporting entity made (such as catastrophic reinsurand ncentrations of insured exposures comprising its probable maximum pr		iii uie types			
		in excess of contractually established retention limits are reinsured and					
6.4		ne reporting entity carry catastrophe reinsurance protection for at least of		ted			
		le maximum loss attributable to a single loss event or occurrence?	,	-		Yes[]	No[X]
6.5	If no. d	escribe any arrangements or mechanisms employed by the reporting e	entity to supplement its catastrophe reinsurance program or to	hedge its			
	exposu	re to unreinsured catastrophic loss:		•			
	The Co	ompany writes only medical professional liability policies with related	I coverage. Catastrophe insurance is not applicable to this	s line of			

Annual Statement for the year 2018 of the Medical Mutual Insurance Company of Maine

GENERAL INTERROGATORIES

PART 2 - PROPERTY & CASUALTY INTERROGATORIES

7.1	limit the	reporting entity reinsured any risk with any other entity under a quota share reinsurance contract that includes a provision that would reinsurer's losses below the stated quota share percentage (e.g., a deductible, a loss ratio corridor, a loss cap, an aggregate limit or illar provisions)?		Yes[]	No [X]
7.2	-	ndicate the number of reinsurance contracts containing such provisions.			0
7.3	•	oes the amount of reinsurance credit taken reflect the reduction in quota share coverage caused by any applicable limiting provision(s)?		Yes[]	No []
8.1	Has this	reporting entity reinsured any risk with any other entity and agreed to release such entity from liability, in whole or in part, from any loss y occur on this risk, or portion thereof, reinsured?		Yes[]	
8.2	If yes, g	ive full information			
9.1	which d surplus than 5% contract	reporting entity ceded any risk under any reinsurance contract (or under multiple contracts with the same reinsurer or its affiliates) for uring the period covered by the statement: (i) it recorded a positive or negative underwriting result greater than 5% of prior year-end as regards policyholders or it reported calendar year written premium ceded or year-end loss and loss expense reserves ceded greater of prior year-end surplus as regards policyholders; (ii) it accounted for that contract as reinsurance and not as a deposit; and (iii) the (s) contain one or more of the following features or other features that would have similar results:			
	(a)	A contract term longer than two years and the contract is noncancellable by the reporting entity during the contract term;			
	(b)	A limited or conditional cancellation provision under which cancellation triggers an obligation by the reporting entity, or an affiliate of the reporting entity, to enter into a new reinsurance contract with the reinsurer, or an affiliate of the reinsurer; Aggregate stop loss reinsurance coverage;			
	(d)	A unilateral right by either party (or both parties) to commute the reinsurance contract, whether conditional or not, except for such provisions which are only triggered by a decline in the credit status of the other party;			
	(e)	A provision permitting reporting of losses, or payment of losses, less frequently than on a quarterly basis (unless there is no activity during the period); or			
•	(f)	Payment schedule, accumulating retentions from multiple years or any features inherently designed to delay timing of the reimbursement to the ceding entity?		Yes[]	No [X]
9.2	with the result gr and loss arrange more ur	reporting entity during the period covered by the statement ceded any risk under any reinsurance contract (or under multiple contracts same reinsurer or its affiliates), for which, during the period covered by the statement, it recorded a positive or negative underwriting reater than 5% of prior year-end surplus as regards policyholders or it reported calendar year written premium ceded or year-end loss is expense reserves ceded greater than 5% of prior year-end surplus as regards policyholders; excluding cessions to approved pooling ments or to captive insurance companies that are directly or indirectly controlling, controlled by, or under common control with (i) one or naffiliated policyholders of the reporting entity, or (ii) an association of which one or more unaffiliated policyholders of the reporting entity inber where:			
	(a)	The written premium ceded to the reinsurer by the reporting entity or its affiliates represents fifty percent (50%) or more of the entire direct and assumed premium written by the reinsurer based on its most recently available financial statement; or			
•	(b)	Twenty-five percent (25%) or more of the written premium ceded to the reinsurer has been retroceded back to the reporting entity or its affiliates in a separate reinsurance contract.		Yes[]	No [X]
9.3	-	9.1 or 9.2, please provide the following information in the Reinsurance Summary Supplemental Filing for General Interrogatory 9:			
	(a)	The aggregate financial statement impact gross of all such ceded reinsurance contracts on the balance sheet and statement of income;			
	(b)	A summary of the reinsurance contract terms and indicate whether it applies to the contracts meeting the criteria in 9.1 or 9.2; and A brief discussion of management's principle objectives in entering into the reinsurance contract including the economic purpose to be achieved.	J		
9.4	ceded a	for transactions meeting the requirements of paragraph 31 of SSAP No. 62R, Property and Casualty Reinsurance, has the reporting entity in risk under any reinsurance contract (or multiple contracts with the same reinsurer or its affiliates) during the period covered by the I statement, and either:	I.		
	(a)	Accounted for that contract as reinsurance (either prospective or retroactive) under statutory accounting principles ("SAP") and as a deposit under generally accepted accounting principles ("GAAP"); or			
9.5		Accounted for that contract as reinsurance under GAAP and as a deposit under SAP? 9.4, explain in the Reinsurance Summary Supplemental Filing for General Interrogatory 9 (Section D) why the contract(s) is treated the for GAAP and SAP.		Yes[]	No [X]
9.6		orting entity is exempt from the Reinsurance Attestation Supplement under one or more of the following criteria:			
0.0	(a)	The entity does not utilize reinsurance; or,		Yes[]	No [X]
	(b)	The entity only engages in a 100% quota share contract with an affiliate and the affiliated or lead company has filed an attestation supplement; or		Yes[]	No [X]
40	(c)	The entity has no external cessions and only participates in an intercompany pool and the affiliated or lead company has filed an attestation supplement.		Yes[]	No [X]
10.11.1	which th	porting entity has assumed risks from another entity, there should be charged on account of such reinsurances a reserve equal to that ne original entity would have been required to charge had it retained the risks. Has this been done? reporting entity guaranteed policies issued by any other entity and now in force?	Yes[X]	No[] Yes[]	N/A [] No [X]
11.2		ive full information		100[]	NO[X]
12.1		porting entity recorded accrued retrospective premiums on insurance contracts on Line 15.3 of the assets schedule, Page 2, state the of corresponding liabilities recorded for:			
	12.11	Unpaid losses	\$		0
	12.12	Unpaid underwriting expenses (including loss adjustment expenses)	\$		0
12.2	Of the a	amount on Line 15.3, Page 2, state the amount that is secured by letters of credit, collateral and other funds?	\$		0
12.3		porting entity underwrites commercial insurance risks, such as workers' compensation, are premium notes or promissory notes d from its insureds covering unpaid premiums and/or unpaid losses?	Yes[]	No[]	N/A [X]
12.4	If yes, p	rovide the range of interest rates charged under such notes during the period covered by this statement:			
	12.41	From			%
	12.42	То			%
12.5	promiss	ers of credit or collateral and other funds received from insureds being utilized by the reporting entity to secure premium notes or ory notes taken by a reporting entity, or to secure any of the reporting entity's reported direct unpaid loss reserves, including osses under loss deductible features of commercial policies?		Yes[X]	No []
12.6	If yes, s	tate the amount thereof at December 31 of current year:			
	12.61	Letters of Credit	\$	25	50,000
	12.62	Collateral and other funds	\$		0
13.1	Largest	net aggregate amount insured in any one risk (excluding workers' compensation):	\$	75	50,000

Annual Statement for the year 2018 of the Medical Mutual Insurance Company of Maine

GENERAL INTERROGATORIES

PART 2 - PROPERTY & CASUALTY INTERROGATORIES

13.2		y reinsurance contract considere ement provision?	ed in the calculation	n of th	nis amount include an	aggr	egate limit of recove	ery v	vithout also including	a		Yes[]	No [X]
13.3		e number of reinsurance contract or facultative obligatory contract					but including faculta	ative	programs, automatic	;			15
14.1	Is the re	porting entity a cedant in a multip	ole cedant reinsur	ance o	contract?							Yes[]	No [X]
14.2	If yes, pl	ease describe the method of allo	cating and record	ding re	insurance among the	ceda	ints:						
14.3	If the an	swer to 14.1 is yes, are the meth	ods described in	item 1	4.2 entirely contained	l in th	e respective multiple	е се	dant reinsurance con	tracts?		Yes[]	No []
14.4	If the an	swer to 14.3 is no, are all the me	thods described i	n 14.2	entirely contained in	writte	n agreements?					Yes[]	No []
14.5	If the an	swer to 14.4 is no, please explain	n:										
15.1	Has the	reporting entity guaranteed any	financed premiun	acco	unts?							Yes[]	No [X]
15.2	If yes, g	ive full information											
16.1	Does the	e reporting entity write any warra	nty business?									Yes[]	No [X]
	If yes, di	sclose the following information	for each of the fol	lowing	types of warranty cov	verag	e: 3		4	5			
			Direct Los Incurred		Direct Losses Unp	aid	Direct Written Premium		Direct Premium Unearned	Direct Premi Earned	um		
	16.11	Home	\$	0	\$	0 9	6 0) \$	0	\$	0		
	16.12	Products	\$	0	\$	0 9	6 0) \$	0	\$	0		
	16.13	Automobile	\$	0	\$	0 9	6 0) \$	0	\$	0		
	16.14	Other*	\$	0	\$	0 \$	6 0) \$	0	\$	0		
	* Discle	ose type of coverage:											
17.1		e reporting entity include amount thorized reinsurance?	s recoverable on	unautl	horized reinsurance ir	n Sch	edule F-Part 3 that	is ex	empt from the statut	ory provision		Yes[]	No [X]
		but not reported losses on contr						exer	mpt from the statutor	y			
	17.11	Gross amount of unauthorized	d reinsurance in S	Schedu	ule F-Part 3 exempt fr	om th	e statutory provisio	n for	unauthorized reinsu	rance	\$		0
	17.12	Unfunded portion of Interroga	tory 17.11								\$		0
	17.13	Paid losses and loss adjustme	ent expenses por	ion of	Interrogatory 17.11						\$		0
	17.14	Case reserves portion of Inter	rogatory 17.11								\$		0
	17.15	Incurred but not reported port	ion of Interrogato	ry 17.1	11						\$		0
	17.16	Unearned premium portion of	Interrogatory 17.	11							\$		0
	17.17	Contingent commission portion	n of Interrogatory	17.11	l						\$		0
18.1	Do you a	act as a custodian for health savi	ngs accounts?									Yes[]	No[X]
18.2	If yes, p	lease provide the amount of cust	odial funds held a	as of th	ne reporting date.						\$		0
18.3	Do you a	act as an administrator for health	savings accounts	?								Yes[]	No [X]
18.4	If yes, pl	ease provide the balance of the	funds administere	ed as o	of the reporting date.						\$		0
19.	Is the re	porting entity licensed or charted	, registered, qual	fied, e	ligible, or writing busi	ness	in at least 2 states?)				Yes[X]	No[]
19.1	If no, do	es the reporting entity assume re	insurance busine	ss tha	t covers risks residing	j in at	least one state other	er th	an the state of domic	cile of the reporting	entity?	Yes[]	No[]

Annual Statement for the year 2018 of the Medical Mutual Insurance Company of Maine **FIVE-YEAR HISTORICAL DATA**

Show amounts in whole dollars only, no cents; show percentages to one decimal place, i.e. 17.6.

	Show amounts in whole dollars only, no cents, si	T 4				I 5
		2018	2 2017	3 2016	4 2015	5 2014
	Gross Premiums Written (Page 8, Part 1B, Cols. 1, 2 & 3)	2010	2017	2010	2010	2014
	Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4)	42 065 376	46 852 574	46 260 660	46 863 944	42,534,668
	Property lines (Lines 1, 2, 9, 12, 21 & 26)					
	Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)					
	All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34)					
	Nonproportional reinsurance lines (Lines 31, 32 & 33)					
	Total (Line 35)				46,863,944	1
	Net Premiums Written (Page 8, Part 1B, Col. 6)	42,000,070	40,032,374	40,200,000	40,003,344	42,554,000
	Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4)	31 875 654	3/1 5/13 //66	36 3/3 607	37 325 073	33,973,741
	Property lines (Lines 1, 2, 9, 12, 21 & 26)					
	Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)					
	All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34)					
	Nonproportional reinsurance lines (Lines 31, 32 & 33)					
	Total (Line 35)	31,875,654	34,503,466	36,343,697	37,325,973	33,973,741
	Statement of Income (Page 4)					
	Net underwriting gain (loss) (Line 8)					
	Net investment gain (loss) (Line 11)					
	Total other income (Line 15)			53,878	-	
	Dividends to policyholders (Line 17)			1,818,767		
	Federal and foreign income taxes incurred (Line 19)		1,256,872			
18.	Net income (Line 20)	7,496,678	6,446,629	6,762,600	7,075,709	12,805,508
	Balance Sheet Lines (Pages 2 and 3)					
19.	Total admitted assets excluding protected cell business (Page 2, Line 26, Col. 3)	309,676,450	312,776,517	297,222,733	281,576,169	264,165,068
20.	Premiums and considerations (Page 2, Col. 3):					
	20.1 In course of collection (Line 15.1)	202,619	341,294	515,075	391,662	207,989
	20.2 Deferred and not yet due (Line 15.2)					
	20.3 Accrued retrospective premiums (Line 15.3)					
21	Total liabilities excluding protected cell business (Page 3, Line 26)					
	Losses (Page 3, Line 1)			62,125,171		
			28,890,763			
	Unearned premiums (Page 3, Line 9)		22,082,031		21,637,043	
	Capital paid up (Page 3, Lines 30 & 31)		470 200 005	405.045.000		
	Surplus as regards policyholders (Page 3, Line 37)	180,379,734	178,308,965	165,815,989	157,551,044	151,172,207
	Cash Flow (Page 5)	0.000.400	0.000.000	40.000.005	44.00= 440	4 404 ===
	Net cash from operations (Line 11)	3,938,160	8,920,892	12,069,325	14,367,116	4,491,559
	Risk-Based Capital Analysis					
	Total adjusted capital			165,815,989		
	Authorized control level risk-based capital	8,988,646	9,485,514	8,775,782	7,874,941	7,901,319
	Percentage Distribution of Cash, Cash Equivalents and Invested Assets					
	(Page 2, Col. 3) (Item divided by Page 2, Line 12, Col. 3) x 100.0					
	Bonds (Line 1)					
31.	Stocks (Lines 2.1 & 2.2)	14.9	17.6	15.4	15.1	16.0
32.	Mortgage loans on real estate (Lines 3.1 & 3.2)					
33.	Real estate (Lines 4.1, 4.2 & 4.3)					
	Cash, cash equivalents and short-term investments (Line 5)					
	Contract loans (Line 6)					
	Derivatives (Line 7)					
	Other invested assets (Line 8)					
	Receivables for securities (Line 9)					
	Securities lending reinvested collateral assets (Line 10)					
	Aggregate write-ins for invested assets (Line 11)					
	Cash, cash equivalents and invested assets (Line 12)					
	Investments in Parent, Subsidiaries and Affiliates	100.0	100.0	100.0	100.0	100.0
	Affiliated bonds (Sch. D, Summary, Line 12, Col. 1)					
	Affiliated preferred stocks (Sch. D, Summary, Line 18, Col. 1)					
	Affiliated common stocks (Sch. D, Summary, Line 24, Col. 1)					
45.	Affiliated short-term investments					
	(subtotals included in Schedule DA, Verification, Column 5, Line 10)					
	Affiliated mortgage loans on real estate					
	All other affiliated					
	Total of above lines 42 to 47					
49.	Total investment in parent included in Lines 42 to 47 above					
50.	Percentage of investments in parent, subsidiaries and affiliates to surplus					
1	as regards policyholders (Line 48 above divided by Page 3, Col. 1, Line 37 x 100.0)					

Annual Statement for the year 2018 of the Medical Mutual Insurance Company of Maine **FIVE-YEAR HISTORICAL DATA**

(Continued)

	(Contin	nued)				
		1	2	3	4	5
		2018	2017	2016	2015	2014
	Capital and Surplus Accounts (Page 4)					
51.	Net unrealized capital gains (losses) (Line 24)	(7,027,747)	7,360,896	2,756,893	(1,096,932)	2,209,745
52.	Dividends to stockholders (Line 35)					
53.	Change in surplus as regards policyholders for the year (Line 38)	2,070,769	12,492,976	8,264,945	6,378,837	4,414,366
	Gross Losses Paid (Page 9, Part 2, Cols. 1 & 2)					
54.	Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4)	19,069,662	28,804,328	11,027,143	6,307,944	10,647,352
55.	Property lines (Lines 1, 2, 9, 12, 21 & 26)					
56.	Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)					
57.	All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34)					
58.	Nonproportional reinsurance lines (Lines 31, 32 & 33)					
59.	Total (Line 35)	19,069,662	28,804,328	11,027,143	6,307,944	10,647,352
	Net Losses Paid (Page 9, Part 2, Col. 4)					
60.	Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4)	14,556,684	15,420,709	10,292,902	6,045,399	8,910,09
61.	Property lines (Lines 1, 2, 9, 12, 21 & 26)					
62.	Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)					
63.	All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34)					
64.	Nonproportional reinsurance lines (Lines 31, 32 & 33)					
65.	Total (Line 35)					
	Operating Percentages (Page 4) (Item divided by Page 4, Line 1) x 100.0					
66.	Premiums earned (Line 1)	100.0	100.0	100.0	100.0	100.0
67.	Losses incurred (Line 2)		48.7	47.4	36.7	7.8
68.	Loss expenses incurred (Line 3)			22.8	16.9	
69.	Other underwriting expenses incurred (Line 4)			25.1	26.8	
70.						
	Other Percentages			-		
71	Other underwriting expenses to net premiums written (Page 4, Lines 4 + 5 - 15					
,	divided by Page 8, Part 1B, Col. 6, Line 35 x 100.0)	30.6	26.7	25.2	24.8	29.4
72.	Losses and loss expenses incurred to premiums earned					
	(Page 4, Lines 2 + 3 divided by Page 4, Line 1 x 100.0)	72.1	70.3	70.2	53.6	28.7
73.	Net premiums written to policyholders' surplus (Page 8, Part 1B, Col. 6, Line 35, divided by Page 3, Line 37, Col. 1 x 100.0)	17.7	19.4	21.9	23.7	22.5
	One Year Loss Development (\$000 omitted)					
74.	Development in estimated losses and loss expenses incurred prior to current year (Schedule P, Part 2-Summary, Line 12, Col. 11)	(2,363)	(5,620)	(4,008)	(10,626)	(15,907
75.	Percent of development of losses and loss expenses incurred to policyholders' surplus of prior year-end (Line 74 above divided by Page 4, Line 21, Col. 1 x 100)	(1.3)	(3.4)	(2.5)	(7.0)	(10.8
	Two Year Loss Development (\$000 omitted)					
76.	Development in estimated losses and loss expenses incurred 2 years before the current year and prior year (Schedule P, Part 2-Summary, Line 12, Col. 12)	(11,341)	(9,535)	(11,341)	(23,554)	(32,482
77.	Percent of development of losses and loss expenses incurred to reported policyholders' surplus of second prior-year end	(0.0)	(0.1)	/7 F\	(40.4)	/00
	(Line 76 above divided by Page 4, Line 21, Col. 2 x 100.0)	(b.8)	(b.1)	(7.5)	(16.1)	(26.

If a party to a merger, have the two most recent years of this exhibit been restated due to a merger in compliance with the disclosure requirements of SSAP No. 3, Accounting Changes and Correction of Errors? Yes [] No [] If no, please explain:

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SCHEDULE P - ANALYSIS OF LOSSES AND LOSS EXPENSES

SCHEDULE P - PART 1 - SUMMARY

(\$000 Omitted)

					, ,							
	F	Premiums Earne					Loss Expense					12
Years in Which	1	2	3				and Cost	Adjusting	and Other	10	11	Number
Premiums				Loss Pa	ayments	Containmer	nt Payments	Payr	nents			of
Were				4	5	6	7	8	9	Salvage	Total	Claims
Earned and	Direct			Direct		Direct		Direct		and	Net Paid	Reported-
Losses Were	and		Net	and		and		and		Subrogation	(Cols. 4 - 5 +	Direct and
Incurred	Assumed	Ceded	(Cols. 1 - 2)	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Received	6 - 7 + 8 - 9)	Assumed
1. Prior	XXX	XXX	XXX					9			9	XXX
2. 2009	50,665	11,176	39,489	19,287	6,369	5,749	397	2,603			20,873	XXX
3. 2010	49,730	11,049	38,681	16,766	3,475	6,384	251	2,687			22,111	XXX
4. 2011	50,183	9,915	40,268	11,278	1,900	6,002	155	2,850			18,075	XXX
5. 2012	45,343	9,471	35,872	12,421	2,850	5,074	193	2,647			17,099	XXX
6. 2013	43,641	8,276	35,365	16,882	7,025	4,471	508	2,548			16,368	XXX
7. 2014	42,522	7,944	34,578	8,217	63	3,886	12	2,245			14,273	XXX
8. 2015	42,931	8,071	34,860	11,041	1,401	3,833	113	2,608			15,968	XXX
9. 2016	46,569	10,045	36,524	5,561	1,373	3,347	119	2,241			9,657	XXX
10. 2017	46,045	12,167	33,878	1,188	58	1,820	21	1,905			4,834	XXX
11. 2018	47,008	11,264	35,744	370	35	532		1,253			2,120	XXX
12. Totals	XXX	XXX	XXX	103,011	24,549	41,098	1,769	23,596	0	0	141,387	XXX

		ı				ı				A 11 11	1.00	- 00		0.5
			1	Llanaid		Defe	ond Coat (Cantainmant I	lanaid	Adjusting		23	24 Total	25
		0		Unpaid	IDNID		nse and Cost (paid		Total	Ni. mala an af
			Basis	Bulk +			Basis		- IBNR	21	22	0.1	Net	Number of
		13	14	15	16	17	18	19	20	Diag at		Salvage	Losses	Claims
		Direct		Direct		Direct		Direct		Direct		and	and	Outstanding-
		and	0-4-4	and	0-4-4	and	0-4-4	and	0-4-4	and	0-4-4	Subrogation	Expenses	Direct and
		Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Anticipated	Unpaid	Assumed
1.	Prior	20				53				4			77	XXX
2.	2009												0	XXX
3.	2010												0	XXX
4.	2011	1,177	100	102	93	156	9	13	1	82			1,327	XXX
5.	2012	200		106		56		46	1	29			436	XXX
6.	2013	1,002		460	290	180		86	15	119			1,542	XXX
7.	2014	1,552		1,122	677	236		566	34	270			3,035	XXX
8.	2015	6,422	250	6,344	3,238	895	9	1,092	140	1,160			12,276	XXX
9.	2016	9,084	954	10,363	3,741	967	29	1,788	159	1,795			19,114	XXX
10.	2017	13,396	1,951	15,705	4,556	1,158	17	3,676	232	2,786			29,965	XXX
11.	2018	4,766	41	19,842	5,889	1,325	32	4,964	269	2,911			27,577	XXX
12.	Totals	37,619	3,296	54,044	18,484	5,026	96	12,231	851	9,156	0	0	95,349	XXX

										34		<u> </u>
			Total Losses and			Loss Expense P	•		abular		_ Net Balar	
			s Expenses Incui			red/Premiums Ea		Disc				ter Discount
		26	27	28	29	30	31	32	33	Inter-Company	35	36
		Direct			Direct					Pooling		Loss
		and			and				Loss	Participation	Losses	Expenses
		Assumed	Ceded	Net	Assumed	Ceded	Net	Loss	Expense	Percentage	Unpaid	Unpaid
1	. Prior	XXX	XXX	XXX	XXX	XXX	XXX			XXX	20	57
2	. 2009.	27,639	6,766	20,873	54.6	60.5	52.9				0	0
3	. 2010.	25,837	3,726	22,111	52.0	33.7	57.2				0	0
4	. 2011.	21,660	2,258	19,402	43.2	22.8	48.2				1,086	241
5	. 2012.	20,579	3,044	17,535	45.4	32.1	48.9				306	130
6	. 2013.	25,748	7,838	17,910	59.0	94.7	50.6				1,172	370
7	. 2014.	18,094	786	17,308	42.6	9.9	50.1				1,997	1,038
8	. 2015.	33,395	5,151	28,244	77.8	63.8	81.0				9,278	2,998
9	. 2016.	35,146	6,375	28,771	75.5	63.5	78.8				14,752	4,362
10). 2017.	41,634	6,835	34,799	90.4	56.2	102.7				22,594	7,371
11	. 2018.	35,963	6,266	29,697	76.5	55.6	83.1				18,678	8,899
12	2. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	69,883	25,466

Note: Parts 2 and 4 are gross of all discounting, including tabular discounting. Part 1 is gross of only nontabular discounting, which is reported in Columns 32 and 33 of Part 1. The tabular discount, if any, is reported in the Notes to Financial Statements, which will reconcile Part 1 with Parts 2 and 4.

Annual Statement for the year 2018 of the Medical Mutual Insurance Company of Maine

SCHEDULE P - PART 2 - SUMMARY

Years in Which Losses Were Incurred 2009 2010 2011 2012 2013 2014 2015 2016 2017 2018 Year Two Year 1. Prior 62,209 55,866 47,060 42,899 39,724 38,046 38,008 37,967 37,971 38,041 70 74 2. 2009 32,338 29,947 24,243 22,347 17,984 17,082 18,585 18,270			Incurred Net Losses and Defense and Cost Containment Expenses Reported at Year End (\$000 omitted)											
Which Losses Were Incurred 2009 2010 2011 2012 2013 2014 2015 2016 2017 2018 Two Year 1. Prior. 62,209 55,866 47,060 42,899 39,724 38,446 38,008 37,967 37,971 38,041 70 74 2. 2009. 32,338 29,947 24,243 22,347 19,316 17,984 17,082 18,585 18,270		1	2	3	4	5	6	7	8	9	10	11	12	
Incurred	Which												_	
2. 2009 32,338 29,947 24,243 22,347 19,316 17,984 17,082 18,585 18,270 18,270 0 (315) 3. 2010 XXX 34,338 29,491 26,956 23,389 19,975 18,966 19,699 19,530 19,424 (106) (275) 4. 2011 XXX XXX 30,664 28,194 22,392 19,414 19,271 19,180 16,739 16,470 (269) (2,710) 5. 2012 XXX		2009	2010	2011	2012	2013	2014	2015	2016	2017	2018		-	
3. 2010 XXX 34,338 29,491 26,956 23,389 19,975 18,966 19,699 19,530 19,424 (106) (275) 4. 2011 XXX XXX 30,664 28,194 22,392 19,414 19,271 19,180 16,739 16,470 (269) (2,710) 5. 2012 XXX XXX <td>1. Prior</td> <td>62,209</td> <td>55,866</td> <td>47,060</td> <td>42,899</td> <td>39,724</td> <td>38,446</td> <td>38,008</td> <td>37,967</td> <td>37,971</td> <td>38,041</td> <td>70</td> <td>74</td>	1. Prior	62,209	55,866	47,060	42,899	39,724	38,446	38,008	37,967	37,971	38,041	70	74	
4. 2011 XXX XXX 30,664 28,194 22,392 19,414 19,271 19,180 16,739 16,470 (269) (2,710) 5. 2012 XXX XXX XXX 28,652 23,376 20,747 18,394 17,954 15,665 14,859 (806) (3,095) 6. 2013 XXX XXX<	2. 2009	32,338	29,947	24,243	22,347	19,316	17,984	17,082	18,585	18,270	18,270	0	(315)	
5. 2012 XXX XXX <td>3. 2010</td> <td>XXX</td> <td>34,338</td> <td>29,491</td> <td>26,956</td> <td>23,389</td> <td>19,975</td> <td>18,966</td> <td>19,699</td> <td>19,530</td> <td>19,424</td> <td>(106)</td> <td>(275)</td>	3. 2010	XXX	34,338	29,491	26,956	23,389	19,975	18,966	19,699	19,530	19,424	(106)	(275)	
6. 2013 XXX XXX <td>4. 2011</td> <td>XXX</td> <td>XXX</td> <td>30,664</td> <td>28,194</td> <td>22,392</td> <td>19,414</td> <td>19,271</td> <td>19,180</td> <td>16,739</td> <td>16,470</td> <td>(269)</td> <td>(2,710)</td>	4. 2011	XXX	XXX	30,664	28,194	22,392	19,414	19,271	19,180	16,739	16,470	(269)	(2,710)	
7. 2014 XXX XXX <td>5. 2012</td> <td>XXX</td> <td>XXX</td> <td>XXX</td> <td>28,652</td> <td>23,376</td> <td>20,747</td> <td>18,394</td> <td>17,954</td> <td>15,665</td> <td>14,859</td> <td>(806)</td> <td>(3,095)</td>	5. 2012	XXX	XXX	XXX	28,652	23,376	20,747	18,394	17,954	15,665	14,859	(806)	(3,095)	
8. 2015 XXX XXX <td>6. 2013</td> <td>XXX</td> <td>XXX</td> <td>XXX</td> <td>XXX</td> <td>24,386</td> <td>20,110</td> <td>17,308</td> <td>15,597</td> <td>17,270</td> <td>15,243</td> <td>(2,027)</td> <td>(354)</td>	6. 2013	XXX	XXX	XXX	XXX	24,386	20,110	17,308	15,597	17,270	15,243	(2,027)	(354)	
9. 2016 XXX XXX <td>7. 2014</td> <td>XXX</td> <td>XXX</td> <td>XXX</td> <td>XXX</td> <td>XXX</td> <td>22,516</td> <td>19,537</td> <td>18,869</td> <td>15,716</td> <td>14,793</td> <td>(923)</td> <td>(4,076)</td>	7. 2014	XXX	XXX	XXX	XXX	XXX	22,516	19,537	18,869	15,716	14,793	(923)	(4,076)	
10. 2017 XXX XXX </td <td>8. 2015</td> <td>XXX</td> <td>XXX</td> <td></td> <td></td> <td></td> <td></td> <td>.,</td> <td>,</td> <td>·</td> <td></td> <td>(,</td> <td>1,075</td>	8. 2015	XXX	XXX					.,	,	·		(,	1,075	
11. 2018	9. 2016	XXX	XXX						,	•	24,735	, , ,	(1,665)	
	10. 2017	XXX								·		,		
	11. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				

SCHEDULE P - PART 3 - SUMMARY

	Cumulative Paid Net Losses and Defense and Cost Containment Expenses Reported at Year End (\$000 omitted) 11 12												
		Cumulativ	e Paid Net Loss	ses and Defense	e and Cost Con	tainment Exper	ises Reported a	t Year End (\$00	00 omitted)		11	12	
	1	2	3	4	5	6	7	8	9	10		Number of	
											Number of	Claims	
Years in											Claims	Closed	
Which											Closed With	Without	
Losses Were											Loss	Loss	
Incurred	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	Payment	Payment	
1. Prior	000	18,101	24,737	33,076	36,259	37,629	37,962	37,965	37,968	37,968	XXX	XXX	
2. 2009	863	2,363	10,230	12,799	14,902	16,694	16,757	16,850	18,270	18,270	XXX	XXX	
3. 2010	XXX	1,385	6,262	9,231	13,865	17,681	17,924	18,714	19,424	19,424	XXX	XXX	
4. 2011	XXX	XXX	578	3,965	7,797	8,616	11,080	14,097	15,126	15,225	XXX	XXX	
5. 2012	XXX	XXX	XXX	602	4,013	6,687	8,153	10,159	12,446	14,452	XXX	XXX	
6. 2013	XXX	XXX	XXX	XXX	599	2,855	5,158	6,009	9,622	13,820	XXX	XXX	
7. 2014	XXX	XXX	XXX	XXX	XXX	736	2,426	6,504	9,641	12,028	XXX	XXX	
8. 2015	XXX	XXX	XXX	XXX	XXX	XXX	1,592	4,979	8,561	13,360	XXX	XXX	
9. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	524	4,460	7,416	XXX	XXX	
10. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	598	2,929	XXX	XXX	
11. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	867	XXX	XXX	

SCHEDULE P - PART 4 - SUMMARY

				OOIIL	DOLL	- 1 /\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	+ - OCIVIIV	1/3131			
			Bulk and	d IBNR Reserves of	on Net Losses and	I Defense and Cos	st Containment Exp	penses Reported a	at Year End (\$000	omitted)	
		1	2	3	4	5	6	7	8	9	10
Years Whice Losses	ich										
Incur	red	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018
1. Prid	ior	30,670	19,565	6,022	2,483	657	209	45			
2. 200	09	24,862	16,728	8,046	3,415	1,257	180	84	39		
3. 201	10	XXX	23,265	15,292	8,216	2,961	951	230	123		
4. 201	11	XXX	XXX	23,817	15,160	8,022	3,014	849	579	161	21
5. 201	12	XXX	XXX	XXX	19,526	10,770	5,551	3,023	1,170	513	151
6. 201	13	XXX	XXX	XXX	XXX	17,366	8,547	5,151	2,267	1,353	241
7. 201	14	XXX	XXX	XXX	XXX	XXX	16,056	8,385	5,691	2,875	977
8. 201	15	XXX	XXX	XXX	XXX	XXX	XXX	18,023	10,220	5,964	4,058
9. 201	16	XXX	XXX	XXX	XXX	XXX	XXX	XXX	19,965	12,731	8,251
10. 201	17	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	21,091	14,593
11. 201	18	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	18,648

Annual Statement for the year 2018 of the Medical Mutual Insurance Company of Maine SCHEDULE T - EXHIBIT OF PREMIUMS WRITTEN

Allocated by States and Territories

				Allocated by	States and	remiones				
		1 Active Status		ncluding Policy and ess Return Premiums Policies Not Taken 3 Direct Premiums	Dividends Paid or Credited to Policyholders on Direct	5 Direct Losses Paid (Deducting	6 Direct Losses	7 Direct Losses	8 Finance and Service Charges not Included	9 Direct Premiums Written for Federal Pur- chasing Groups
	States, Etc.	(a)	Written	Earned	Business	Salvage)	Incurred	Unpaid	in Premiums	(Incl. in Col. 2)
1.	AlabamaAL	N								
2.	AlaskaAK	N								
3.	ArizonaAZ	N								
4.	ArkansasAR	N								
	CaliforniaCA									
	ColoradoCO									
	ConnecticutCT	N								
		N								
	District of ColumbiaDC									
	FloridaFL									
	GeorgiaGA									
12.	HawaiiHI	N								
13.	IdahoID	N								
14.	IllinoisIL	N								
15.	IndianaIN	N								
	lowaIA	N								
	KansasKS	N								
	KentuckyKY	N								
	LouisianaLA									
			00 400 700	24 020 450	4 420 740	10 477 000	20 700 000	60 000 070	21,645	
	MaineME	L	29,422,793	34,030,450	1,139,712	12,477,208	22,786,692	62,830,670	,	
	MarylandMD						·			
	MassachusettsMA		202,537	195,575	4,873		(741,482)	57,402	280	
	MichiganMI	N								
	MinnesotaMN	N								
25.	MississippiMS	N								
	MissouriMO	N								
	MontanaMT									
	NebraskaNE									
	NevadaNV									
	New HampshireNH		5,468,682		269,228	2,217,245	4,272,501	14,863,422	2,880	
	New JerseyNJ						4,212,301	14,003,422	2,000	
	New MexicoNM									
	New YorkNY	N								
	North CarolinaNC									
35.	North DakotaND	N								
36.	OhioOH	N								
37.	OklahomaOK	N								
38.	OregonOR	N								
39.	PennsylvaniaPA	N								
	Rhode IslandRl									
	South CarolinaSC									
	South DakotaSD									
	TennesseeTN									
	TexasTX									
	UtahUT							40.044.154		
-	VermontVT		6,955,303	6,901,424	294,432	4,375,209	5,800,962	13,911,122	2,255	
	VirginiaVA									
	WashingtonWA									
	West VirginiaWV									
50.	WisconsinWI	N								
	WyomingWY									
	American SamoaAS									
	GuamGU					l		l		
	Puerto RicoPR									
	US Virgin IslandsVI									
	Northern Mariana IslandsMP	N								
	CanadaCAN	N	-	-						
	Aggregate Other AlienOT	XXX	0	0	0	0	0	0	0	0
59.	Totals	XXX	42,049,315	46,993,778	1,708,245	19,069,662	32,118,673	91,662,616	27,060	0
				DETA	ILS OF WRITE-IN	IS				
58001.		XXX								
58002.		XXX				l				
		XXX								
	Summary of remaining write-ins for	,,,,,								
	Line 58 from overflow page	XXX	0	0	0	0	0	0	0	n
	Totals (Lines 58001 thru 58003+	,,,,,								
	Line 58998) (Line 58 above)	XXX	0	0	0	0	0	0	0	0

Line 58998) (Line 58 above)

Explanation of Basis of Allocation of Premiums by States, etc.

Premiums are allocated to those states where the insured risks are located.

(a) Active Status Counts:

L - Licensed or Chartered - Licensed insurance carrier or domiciled RRG.... 4_ E - Eligible - Reporting entities eligible or approved to write surplus lines in the state 0 surplus lines in the state of domicile...

R - Registered - Non-domiciled RRGs	0
Q - Qualified - Qualified or accredited reinsurer	0
N - None of the above - Not allowed to write business in the state	53

SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP

PART 1 – ORGANIZATIONAL CHART

SPONSOR

MEDICAL MUTUAL INSURANCE COMPANY OF MAINE FEIN #01-0355669 NAIC Company Code: 36277 ME

BEACONHARBOR MUTUAL RISK RETENTION GROUP FEIN #46-0731756 NAIC Company Code: 14487 **INSURANCE AFFILIATE**

SPECIALTY INSURANCE PLACEMENT SERVICES, LLC FEIN #94-3414988 100%

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